COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

FOR NORTHWEST LOUISIANA

Adopted August 18, 2017

NORTHWEST LOUISIANA COUNCIL OF GOVERNMENTS
625 Texas Street, Suite 200, Shreveport, LA 71101
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Public Involvement Coordinator
(318) 841-5950 (voice)
Lisa.frazier@nlcog.org
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Shreveport, LA 71101

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Executive Summary

The mission of the Coordinated Public Transit Human Services Planning Committee is to work collaboratively to improve transportation services for persons with lower incomes, older adults, and individuals with disabilities by identifying needs, understanding resources, maximizing access and mobility, and minimizing costs for the entire community.

The Northwest Louisiana Council of Governments, along with public transportation providers and human service agencies across the ten-parish region of Northwest Louisiana, developed this plan as required by the Federal Transit Administration (FTA) under federal law and as part of the continuing, coordinated and comprehensive planning process. The plan serves as a unified, comprehensive strategy for public transportation service delivery that identifies the transportation needs of individuals with disabilities, older adults, and individuals with limited incomes. It lays out strategies for meeting those needs and prioritizes ways to meet them. The vision includes goals and action steps that support a service concept for regional and community-based service networks.

Identifying the needs and gaps in current service are the cornerstones of this plan. Public transportation is particularly important to people who are considered transportation disadvantaged. Transportation-disadvantaged people, otherwise known as individuals with special transportation needs, are those who are unable to transport themselves due to their age, income, or health condition.

Partnering with local human services agencies, including the councils on aging, agencies assisting those with disabilities, medical and mental health providers, organizations addressing the needs of the homeless, community service agencies, and the Louisiana Department of Transportation and Development enabled this plan to address a variety of needs within the community.

The first step in developing a coordinated plan was to understand the background and history of coordinated planning, both locally and nationally. Taking a closer look at the regional transportation landscape provided a way to forge a common vision, avoid working at cross-purposes, and align work programs toward common goals. Coordination among the many service providers lead to an opportunity to identify mobility needs. The ultimate goal of this coordinated planning was to stretch scarce resources and improve the mobility of each individual in our communities.

To move forward in the planning process, obtaining an inventory of existing transportation assets of the region was the next critical step. Based on a two-fold approach – data-driven and observation-derived – the committee visualized areas of greatest need, along with areas of concentrated populations of the transportation disadvantaged.

After evaluating unmet needs, coordination challenges, and existing assets, the committee established goals and objectives that outline the region’s approach for moving forward with coordinated transportation planning in Northwest Louisiana.
Introduction

A robust public transportation and enhanced mobility network is essential to focused regional growth, an increased quality of life for all residents, and a healthy environment and economy. Public transportation offers an affordable, means of transportation and an alternative to personal vehicle ownership.

Public transportation and enhanced mobility transportation serve many purposes for a range of people – teens traveling to their first jobs, young adults who are pinching pennies or who choose not to own a vehicle, seniors who can no longer drive safely, people with physical or mental limitations, and those who cannot afford the expenses of owning a vehicle or choose to conserve resources.

Public transportation includes various types of multiple-occupancy vehicle services, such as bus, charter, and demand-response options within the ten-parish region of Northwest Louisiana. These parishes include: Bienville, Bossier, Caddo, Claiborne, DeSoto, Lincoln, Natchitoches, Red River, Sabine, and Webster.

This document is the region’s Coordinated Public Transportation – Human Services Transportation Plan. It serves as a unified, comprehensive strategy for public transportation service delivery that identifies the transportation needs of individuals with disabilities, older adults, youth, and individuals with limited incomes. It lays out strategies for meeting those needs and prioritizes ways to meet them. The vision includes goals and action steps that support a service concept for regional and community-based service networks.

The plan was originally developed in response to new requirements for planning for special needs transportation in the 2005 federal transportation law, the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). This update covers federal fiscal years 2017–2020 and addresses updated requirements and guidance contained in the 2015 federal transportation law — Fixing America’s Surface Transportation Act (FAST ACT).

Northwest Louisiana Council of Governments

The Northwest Louisiana Council of Governments (NLCOG) is an intergovernmental association of local governments established to assist in planning for common needs, cooperating for the mutual benefit, and coordinating for sound regional development.
NLCOG serves as the Regional Planning Council and its purpose is to strengthen both the individual and collective power of local governments and to help them recognize regional opportunities, eliminate unnecessary duplication, and make joint decisions for the benefit of the community. This is achieved by developing and implementing constructive and workable policies and programs for solving area-wide problems. These issues include, but are not limited to, matters affecting transportation, economic, healthy, safety, welfare, education, and regional development issues. As an association of cities, towns, parishes, ports, and state agencies that serves as a forum for developing policies and making decisions about regional growth and transportation issues, NLCOG does not provide any direct services to the population of Northwest Louisiana. However, NLCOG encourages public comment on its policies, programs, and funding cycles, and seeks to increase opportunities for public comment, particularly by historically underserved populations and those that are transportation disadvantaged.

To comply with the federal requirements, NLCOG developed the Coordinated Human Services Public Transportation Plan (Coordinated Plan). This plan serves as a strategy to map a course for improving coordination between transportation systems and providers, as well as strengthening transportation services for those with special needs. By continuing to cover a diverse set of transportation topics pertinent to individual localities and the region, the Coordinated Plan offers an inclusive snapshot of the region’s available services and a comprehensive vision of special needs transportation now and in the future.

**Required Elements of the Coordinated Plan**

- Inventory of current services.
- Assessment of transportation needs for individuals with disabilities, older adults, and persons with limited incomes.
- Identification of coordination actions to eliminate or reduce duplication in services and strategies for more efficient utilization of resources.
- Strategies to address identified gaps in services.
- The prioritization of implementation strategies.

**Coordinated Special Needs Transportation**

It is a given that the primary mode of transportation for most people in the Northwest Louisiana region is a private vehicle. However, for those with special transportation needs, driving a car is not always an available or viable option. Special needs transportation is any mode of transportation used by those defined as transportation-disadvantaged or with a special transportation need. This includes buses that have regular stops (i.e., fixed-route transit for the general public, and schools), specialized services such as vans, buses, and taxis that pick-up
people at the curb or door (i.e., demand response or dial-a-ride), rideshare programs, volunteer driver services, or any federal, state, and local publicly-funded transportation.

Coordinated special needs transportation is when multiple organizations work together for their mutual benefit, gaining economies of scale, eliminating duplication of, expanding, and/or improving the quality of service in order to better address the transportation needs of the special needs population their agencies serve.

According to United We Ride, coordination makes the most efficient use of limited transportation resources by avoiding duplication caused by overlapping individual program efforts. It encourages the use and sharing of existing community resources. There are many levels of coordination, ranging from the basic sharing of training resources to the full integration of services. Examples of coordinating transportation include:

- Establishing feeder services to connect to fixed transit routes.
- Identifying barriers to coordination in the regulatory environment and advocating for change.
- Making greater use of technology to find providers and schedule trips.
- Finding ways to group riders on the same vehicle even when they are sponsored by different funding agencies.
- Leveraging purchasing power for vehicles, fuel, maintenance, or training.

Regardless of the type of coordination, it can involve the cooperation of:

- Transportation providers — transit agencies, school districts, social service agencies, transportation brokers, private providers, non-profit transportation programs.
- Service providers — such as doctors scheduling medical appointments based on transportation availability, land use planners including mobility options as part of zoning decisions, developers building “walkable” communities.
- People with special transportation needs.

As such, this plan brings together service providers, transportation funders, riders, and the community-at-large to improve special needs transportation throughout Northwest Louisiana.
To coordinate at the service delivery phase, coordination must also occur at the planning phase. Coordinated planning is a way to forge a common vision, avoid working at cross-purposes, and align work programs toward common goals. Over the past decade, governments at all levels have placed increasing emphasis on the need to coordinate transportation services. The primary goal in this coordination effort is to create efficiencies that will lead not only to improved service, but expanded service.

Coordination at the Regional Level

Regional plans address cross-jurisdictional issues and facilitate connectivity for a service, such as transportation or education. Regional bodies involve local agencies from multiple jurisdictions as regional plans are developed. Regional plans give direction to local plans, and local plans also feed into regional plans. Coordination provides an opportunity to identify mobility needs and better manage mobility than just providing rides. During the coordination process, two or more organizations interact to accomplish their transportation objectives and to achieve greater cost-effectiveness in their service delivery. The ultimate goal of coordination is to stretch scarce resources and improve the mobility of each individual.

In addition, the Coordinated Plan serves as the framework for the prioritization of projects seeking funding through the FTA Enhanced Mobility of Seniors and Individuals with Disabilities (Section 5310) and FTA Rural Public Transportation Program (Section 5311).

Transportation Assets of Our Community

The region’s transit system is a network of services provided by a variety of agencies within the urban, suburban and rural areas. The figure of transportation assets of the region primarily focuses on the major public/non-profit transportation providers.

Urban and Rural Transit

SporTran provides transit service for the city of Shreveport and parts of Bossier City every day with varying hours of operation. The system is operated by Shreveport Transit Management. SporTran maintains a fleet of over 50 buses equipped to handle all passengers, including those with disabilities. The buses are equipped with the latest emission reduction systems and include dual-fuel (hybrid) buses, and buses are powered by compressed natural gas (CNG). LiftLine is SporTran’s demand-responsive paratransit service for qualifying persons. LiftLine vehicles are specially equipped with wheelchair lifts/ramps and other accessibility features.

Bienville, Claiborne, DeSoto, Lincoln, Red River and Webster Parishes provide accessible and affordable transit services in their respective parishes for people of all ages. These providers
primarily serve destinations in the community including grocery stores, banks, medical facilities, work sites, job training sites, and senior centers.

Specialized Transit

Many of the transit providers that currently participate in the Coordinated Human Services Public Transportation program fall under the category of specialized transit. The characteristic of these organizations and agencies can be summarized as demand-responsive and tailored to meet the personal needs of the residents in the service area. Councils on Aging provide transportation to meal sites across their parishes while ARCs provide transportation for their clients to work sites.

Figure 1 – Service Providers

<table>
<thead>
<tr>
<th>Bienville Parish</th>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Agency</strong></td>
<td>Bienville Parish Council on Aging</td>
</tr>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5311 – Rural Transportation</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>The Bienville Parish Public Transit provides public transportation for Bienville Parish. This transportation is available to all persons of all ages.</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>Bienville Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>8:00 a.m. – 4:30 p.m., Monday through Friday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>9</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Bossier Parish</th>
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<tbody>
<tr>
<td><strong>Agency</strong></td>
<td>Bossier Parish Council on Aging</td>
</tr>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>The Bossier Parish Council on Aging provides demand-responsive transportation for the elderly and disabled in Bossier Parish.</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>Bossier Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>4:00 a.m. – 4:30 p.m., Monday through Friday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>6 vans, all lift-equipped</td>
</tr>
</tbody>
</table>
## A Closer Look

<table>
<thead>
<tr>
<th>Caddo Parish</th>
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</thead>
<tbody>
<tr>
<td><strong>Agency</strong></td>
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<tr>
<td><strong>Funding</strong></td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
</tr>
</tbody>
</table>

| **Agency** | Socialization Services, Inc. |
|-------------|
| **Funding** | FTA Section 5310 – Enhanced Mobility of Seniors & Disabled |
| **Service provided** | Demand-responsive and fixed for the elderly and those with disabilities |
| **Geography served** | Cedar Grove, Mooretown and Hollywood neighborhoods in Shreveport |
| **Operating hours** | 8:30 a.m. – 4:00 p.m. Monday through Friday |
| **Vehicles** | 1 lift-equipped |

| **Agency** | The ARC Caddo-Bossier |
|-------------|
| **Funding** | FTA Section 5310 – Enhanced Mobility of Seniors & Disabled |
| **Service provided** | Demand-responsive qualified clients with disabilities |
| **Geography served** | Bossier and Caddo Parishes |
| **Operating hours** | |
| **Vehicles** | 7 |
### New Horizons Independent Living Center

**Agency** | New Horizons Independent Living Center  
---|---  
**Funding** | FTA Section 5310 – Enhanced Mobility of Seniors & Disabled  
**Service provided** | New Horizons serves adults with all types of disabilities, as well as high school students with disabilities who are transitioning to the community and to the workforce.  
**Geography served** | Bossier and Caddo Parishes  
**Operating hours** |  
**Vehicles** |  

### Claiborne Parish

**Agency** | Claiborne Parish Office of Community Services  
---|---  
**Funding** | FTA Section 5311 – Rural Transportation  
**Service provided** | Claiborne Parish Police Jury Office of Community Services operates transportation available to all residents of the parish.  
**Geography served** | Claiborne Parish  
**Operating hours** | 5:00 a.m. – 3:00 p.m., Monday through Friday  
**Vehicles** | 8  

### DeSoto Parish

**Agency** | DeSoto Parish Council on Aging  
---|---  
**Funding** | FTA Section 5311 – Rural Transportation  
**Service provided** | DeSoto Public Transit is the only full service public transportation system in DeSoto Parish.  
**Geography served** | DeSoto Parish  
**Operating hours** | 3:30 a.m. – 7:00 p.m., Monday through Friday  
**Vehicles** | 7
## A Closer Look

<table>
<thead>
<tr>
<th>Agency</th>
<th>DeSoto Habilitation Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>DeSoto Habilitation Services provides transportation for the clients in the Day Hab program. Transportation incudes to the Day Hab from their homes and back, to work sites, shopping, doctor appointments, events, activities and field trips.</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>DeSoto Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>5:30 a.m. – 5:00 p.m., Monday through Friday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>5</td>
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### Lincoln Parish

<table>
<thead>
<tr>
<th>Agency</th>
<th>Humanitarian Enterprises of Lincoln Parish</th>
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</thead>
<tbody>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5311 – Rural Transportation</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>Humanitarian Enterprises of Lincoln Parish operates the only public transportation system in Lincoln Parish that is accessible and open to all residents of the parish, regardless of age or income.</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>Lincoln Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>6:00 a.m. – 5:00 p.m., Monday through Friday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>6</td>
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<table>
<thead>
<tr>
<th>Agency</th>
<th>Lincoln Council on Aging</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>Demand-responsive service for the elderly and disabled</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>DeSoto Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>8:00 a.m. – 4:00 p.m., Monday through Friday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>3</td>
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<table>
<thead>
<tr>
<th>Agency</th>
<th>Louisiana Center for the Blind</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funding</strong></td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td><strong>Service provided</strong></td>
<td>Fixed-route service for blind and visually impaired clients</td>
</tr>
<tr>
<td><strong>Geography served</strong></td>
<td>DeSoto Parish</td>
</tr>
<tr>
<td><strong>Operating hours</strong></td>
<td>8:00 a.m. – 4:00 p.m., Monday through Sunday</td>
</tr>
<tr>
<td><strong>Vehicles</strong></td>
<td>4 (2 lift-equipped)</td>
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### A Closer Look

<table>
<thead>
<tr>
<th>Agency</th>
<th>People Centered Support Services, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Route-deviation service for the disabled and Medicaid waiver supported employment services.</td>
</tr>
<tr>
<td>Geography served</td>
<td>Lincoln and Jackson Parishes</td>
</tr>
<tr>
<td>Operating hours</td>
<td>7:30 a.m. – 3:30 p.m., Monday through Friday</td>
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<td>Vehicles</td>
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#### Natchitoches Parish

<table>
<thead>
<tr>
<th>Agency</th>
<th>Natchitoches ARC</th>
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<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Route-deviation service for the disabled and developmentally disabled.</td>
</tr>
<tr>
<td>Geography served</td>
<td>Natchitoches Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>5:00 a.m. - 8:30 a.m. Monday through Friday 1:00 p.m. - 5:00 p.m. Monday through Friday</td>
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<tr>
<td>Vehicles</td>
<td>2 (1 lift equipped)</td>
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#### Red River Parish

<table>
<thead>
<tr>
<th>Agency</th>
<th>Red River Parish Council on Aging</th>
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</thead>
<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5311 – Rural Transportation</td>
</tr>
<tr>
<td>Service provided</td>
<td>Demand-response for the general public for employment, training and non-emergency medical trips.</td>
</tr>
<tr>
<td>Geography served</td>
<td>Red River Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>6:30 a.m. - 3:30 p.m. Monday through Friday</td>
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<tr>
<td>Vehicles</td>
<td>6</td>
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<thead>
<tr>
<th>Agency</th>
<th>Red River ARC</th>
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</thead>
<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Demand-response for the elderly and disabled</td>
</tr>
<tr>
<td>Geography served</td>
<td>Red River Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>6:30 a.m. – 3:30 p.m., Monday through Sunday</td>
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<tr>
<td>Vehicles</td>
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## Sabine Parish

<table>
<thead>
<tr>
<th>Agency</th>
<th>Sabine Parish ARC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Route deviation for the mentally disabled.</td>
</tr>
<tr>
<td>Geography served</td>
<td>Sabine Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>7:30 a.m. - 4:00 p.m. Monday through Friday</td>
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<tr>
<td>Vehicles</td>
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<thead>
<tr>
<th>Agency</th>
<th>Sabine COA</th>
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<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Demand-response for the elderly and disabled</td>
</tr>
<tr>
<td>Geography served</td>
<td>Red River Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>8:00 a.m. – 4:00 p.m., Monday through Sunday</td>
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<tr>
<td>Vehicles</td>
<td>5 (2 lift equipped)</td>
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## Webster Parish

<table>
<thead>
<tr>
<th>Agency</th>
<th>Webster Parish Office of Community Services</th>
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<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5311 – Rural Transportation</td>
</tr>
<tr>
<td>Service provided</td>
<td>Webster Parish Office of Community Services provides transportation for Title XIX non-emergency medical transportation, welfare to work participants, and for all residents of Webster Parish.</td>
</tr>
<tr>
<td>Geography served</td>
<td>Webster Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>6:00 a.m. - 6:00 p.m. Monday through Friday</td>
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<tr>
<td>Vehicles</td>
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<thead>
<tr>
<th>Agency</th>
<th>Minden ARC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Fixed-route for the elderly and developmentally disabled</td>
</tr>
<tr>
<td>Geography served</td>
<td>Webster Parish and part of Claiborne Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>8:00 a.m. – 4:00 p.m., Monday through Sunday</td>
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<tr>
<td>Vehicles</td>
<td>5 (2 lift equipped)</td>
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A Closer Look

### Agency
<table>
<thead>
<tr>
<th>Agency</th>
<th>Webster COA</th>
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<tbody>
<tr>
<td>Funding</td>
<td>FTA Section 5310 – Enhanced Mobility of Seniors &amp; Disabled</td>
</tr>
<tr>
<td>Service provided</td>
<td>Demand-responsive service for the elderly and disabled</td>
</tr>
<tr>
<td>Geography served</td>
<td>Webster Parish and part of Claiborne Parish</td>
</tr>
<tr>
<td>Operating hours</td>
<td>8:00 a.m. – 4:00 p.m., Monday through Friday</td>
</tr>
<tr>
<td>Vehicles</td>
<td>2 (2 lift equipped)</td>
</tr>
</tbody>
</table>

Transit coverage is measured by how many residents live within a half-mile of a transit route or stop. It is used to measure progress toward transit system expansion. Transit coverage analysis also considers the number of jobs located within proximity of transit routes.

**Transportation Disadvantaged Populations**

Public transportation is particularly important to people who are considered transportation disadvantaged. Transportation-disadvantaged people, otherwise known as individuals with special transportation needs, are those who are unable to transport themselves due to their age, income, or health condition. For the purposes of this plan, the term “transportation-disadvantaged” and “persons with special transportation needs” are used interchangeably. Transportation-disadvantaged people may have different types of transportation requirements. They may include a frail elderly woman trying to get to a specialized health center or an evening concert, a homeless elementary student trying to get to his or her school, a person with epilepsy trying to get to a social activity, an unemployed student trying to complete an internship, a single mom without a reliable car who works a graveyard shift at a minimum wage job, or a visually impaired individual with a guide dog traveling to visit his parents after working all day.

The Coordinated Plan for Northwest Louisiana identifies special needs transportation populations as individuals with a disability, low-income individuals, and seniors age 65+. The Coordinated Plan also includes the addition of veterans, individuals with Limited English Proficiency (LEP), and zero-vehicle households as subset target populations. While not necessarily having a special transportation need, both population groups tend to be correlated with one or more special needs categories at a higher rate than the general population.
People with disabilities often have the most varied transportation needs. Disabilities may be physical, mental, emotional developmental, or a combination of these. The ability to access daily needs, including education, employment, and health care, is crucial to maintaining quality of life. Individuals with a disability are often at a disadvantage as their disability may limit their mobility and impede access to services and employment opportunities. In addition to social isolation, limited mobility can lead to higher levels of unemployment and poverty among disabled populations. When compared to the general population, individuals with a disability are more likely to be low-income or unemployed. In the ten-parish region, 25 percent of individuals with a disability are low-income, compared to 20 percent for the general population.

Beyond employment, the transportation needs of individuals with a disability can be life threatening. If a medically vulnerable person is unable to get the medical attention he or she needs, lack of mobility may put a life at additional risk. In addition to employment and medical treatment, the ability to actively engage in a social life is an important part of life, regardless of ability. Individuals with a disability are more likely to be transit-dependent or rely on another specialized transportation service. As a result, it is crucial to provide appropriate transportation options, to ensure disabled individuals are able to access the same level of services and opportunity as the general population.

Figure 2 – Population Estimates of People with a Disability

<table>
<thead>
<tr>
<th>Parish</th>
<th>Total civilian noninstitutionalized population</th>
<th>With a disability</th>
<th>Percent with a disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>13,653</td>
<td>2,888</td>
<td>21.2%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>118,561</td>
<td>14,854</td>
<td>12.5%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>249,783</td>
<td>36,496</td>
<td>14.6%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>14,706</td>
<td>3,039</td>
<td>20.7%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>26,808</td>
<td>4,751</td>
<td>17.7%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>46,735</td>
<td>6,600</td>
<td>14.1%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>38,611</td>
<td>6,627</td>
<td>17.2%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>8,726</td>
<td>1,207</td>
<td>13.8%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>23,831</td>
<td>4,043</td>
<td>17.0%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>39,693</td>
<td>7,614</td>
<td>19.2%</td>
</tr>
</tbody>
</table>

2011-2015 American Community Survey 5-Year Estimates, S1810: Disability Characteristics
# Coordinated Human Services Transportation Plan

## Population with Disabilities

### Legend

- **Interstates**
- **Percent with a Disability**
  - <15%
  - 15.1% - 18%
  - >18.1%

*Percent of civilian noninstitutionalized population with disability*

---

### Table: Population with Disabilities by Parish

<table>
<thead>
<tr>
<th>Parish</th>
<th>Total civilian noninstitutionalized pop.</th>
<th>With a disability</th>
<th>Percent with a disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>37,659</td>
<td>2,653</td>
<td>7.1%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>116,516</td>
<td>14,904</td>
<td>12.8%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>126,793</td>
<td>16,010</td>
<td>12.7%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>46,205</td>
<td>3,820</td>
<td>8.3%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>46,880</td>
<td>4,195</td>
<td>9.1%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>46,720</td>
<td>6,600</td>
<td>14.2%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>38,569</td>
<td>6,087</td>
<td>15.8%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>46,001</td>
<td>3,400</td>
<td>7.4%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>40,659</td>
<td>3,664</td>
<td>9.0%</td>
</tr>
</tbody>
</table>

Note: This map was created using 2013-2015 American Community Survey 5-Year Estimates, Civilian Disability Characteristics.
Transportation costs put a tremendous strain on the budgets of individuals with low incomes. A study by the Metropolitan Policy Program at the Brookings Institution found that the working poor spend a much higher portion of their income on commuting and that the combined cost of commuting and housing make up a larger portion of household budgets of the working poor than other households. For many people in this situation, owning a private vehicle, or being able to maintain a private vehicle, is not a reasonable option. Retaining employment can be difficult for low-income populations if they do not have a reliable private automobile and there are no transportation options. Transit dependent employees who work late night or early morning hours are at a particular disadvantage due to inconsistent or unavailable transit service.

*Figure 3 – Population Estimates of Low-Income Individuals*

<table>
<thead>
<tr>
<th>Parish</th>
<th>Total</th>
<th>Below poverty level</th>
<th>Percent below poverty level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>13,634</td>
<td>3,754</td>
<td>27.5%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>120,972</td>
<td>17,303</td>
<td>14.3%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>249,717</td>
<td>53,752</td>
<td>21.5%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>14,673</td>
<td>4,058</td>
<td>27.7%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>26,693</td>
<td>7,059</td>
<td>26.4%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>44,103</td>
<td>14,146</td>
<td>32.1%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>38,357</td>
<td>11,208</td>
<td>29.2%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>8,701</td>
<td>1,937</td>
<td>22.3%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>23,694</td>
<td>4,626</td>
<td>19.5%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>39,581</td>
<td>9,327</td>
<td>23.6%</td>
</tr>
</tbody>
</table>

*2011-2015 American Community Survey 5-Year Estimates, S1701: Poverty Status in the Past 12 months*
Coordinated Human Services Transportation Plan
Population of Low Income

Note: This map was created using 2011-2015 American Community Survey 5-Year Estimates. S1703: Poverty Status in the past 12 months

Legend
- Intercostals
Percent below poverty level
- <15%
- 15% - 24%
- ≥24%

<table>
<thead>
<tr>
<th>Parish</th>
<th>Total</th>
<th>Below poverty level</th>
<th>Percent below poverty level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>7,581</td>
<td>2,754</td>
<td>27.7%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>11,977</td>
<td>3,903</td>
<td>32.9%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>10,977</td>
<td>3,771</td>
<td>34.4%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>11,977</td>
<td>3,903</td>
<td>32.9%</td>
</tr>
<tr>
<td>DeSoto Parish</td>
<td>16,641</td>
<td>5,805</td>
<td>35.2%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>11,002</td>
<td>3,646</td>
<td>33.1%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>10,321</td>
<td>3,046</td>
<td>29.4%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>8,751</td>
<td>2,582</td>
<td>29.7%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>10,977</td>
<td>3,903</td>
<td>35.2%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>10,977</td>
<td>3,903</td>
<td>35.2%</td>
</tr>
</tbody>
</table>
While veterans are not traditionally considered a transportation-disadvantaged group, they often face transportation barriers and have other transportation-disadvantaged characteristics. With Barksdale Air Force Base as an anchor, Northwest Louisiana is home to many military veterans. Transitioning from military service to civilian life can be a difficult process for many returning veterans. At the same time, World War II veterans are well into their 80’s and 90’s and Korean and Vietnam War veterans are nearly 70 or older. For some veterans and their families, routine transportation is a challenge because of a disability or financial hardship. Many veterans returning home are entering the work force or going back to school with the intent of entering the workforce at a later date.

Nationally, veterans make up 9 percent of the population; however, in the ten-parish region, that figure rises to 10 percent, with nearly 43 percent of the region’s veterans living in Caddo Parish. When compared to the general population, a disproportionately higher percentage of veterans have a disability. This is evident in figure 4 which shows that, in Northwest Louisiana, the proportion of veterans with a disability is 27 percent compared to 19 percent for the region.

**Figure 4 – Population Estimates of Veterans**

<table>
<thead>
<tr>
<th>Parish</th>
<th>Civilian population 18 years and over</th>
<th>Veterans</th>
<th>Percent</th>
<th>Nonveterans</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>10,759</td>
<td>1,026</td>
<td>9.5%</td>
<td>9,733</td>
<td>90.5%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>88,536</td>
<td>12,219</td>
<td>13.8%</td>
<td>76,317</td>
<td>86.2%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>191,585</td>
<td>18,679</td>
<td>9.7%</td>
<td>172,906</td>
<td>90.3%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>13,479</td>
<td>1,014</td>
<td>7.5%</td>
<td>12,465</td>
<td>92.5%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>20,450</td>
<td>2,080</td>
<td>10.2%</td>
<td>18,370</td>
<td>89.8%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>37,689</td>
<td>2,606</td>
<td>6.9%</td>
<td>35,083</td>
<td>93.1%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>29,887</td>
<td>2,292</td>
<td>7.7%</td>
<td>27,595</td>
<td>92.3%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>6,632</td>
<td>502</td>
<td>7.6%</td>
<td>6,130</td>
<td>92.4%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>18,376</td>
<td>1,988</td>
<td>10.8%</td>
<td>16,388</td>
<td>89.2%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>31,138</td>
<td>3,082</td>
<td>9.9%</td>
<td>28,056</td>
<td>90.1%</td>
</tr>
</tbody>
</table>

2011-2015 American Community Survey 5-Year Estimates, S2101: Veteran Status
A Closer Look

Coordinated Human Services Transportation Plan
Population of Veterans

Legend
- Intertstates
- Veterans
  - < 8%
  - 8% - 10%
  - > 10%

*Percent of civilian population 18 years and over

Note: This map was created using 2011-2015 American Community Survey 5-Year Estimates, Survey Veteran Status in the past 12 months

<table>
<thead>
<tr>
<th>Parish</th>
<th>Civilian population all years and over</th>
<th>Veterans</th>
<th>Percent</th>
<th>Nonveterans</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bossier Parish</td>
<td>14,723</td>
<td>1,031</td>
<td>7.0%</td>
<td>13,692</td>
<td>92.0%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>110,359</td>
<td>11,209</td>
<td>10.1%</td>
<td>99,145</td>
<td>90.0%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>11,472</td>
<td>1,939</td>
<td>16.8%</td>
<td>9,533</td>
<td>83.2%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>26,957</td>
<td>2,480</td>
<td>9.2%</td>
<td>24,477</td>
<td>90.8%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>37,684</td>
<td>3,668</td>
<td>9.8%</td>
<td>34,016</td>
<td>90.2%</td>
</tr>
<tr>
<td>Natchitoches</td>
<td>32,557</td>
<td>2,529</td>
<td>7.8%</td>
<td>30,028</td>
<td>92.2%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>13,257</td>
<td>2,426</td>
<td>18.1%</td>
<td>10,831</td>
<td>81.9%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>18,349</td>
<td>1,582</td>
<td>8.6%</td>
<td>16,767</td>
<td>91.4%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>22,053</td>
<td>3,082</td>
<td>14.0%</td>
<td>18,971</td>
<td>87.0%</td>
</tr>
</tbody>
</table>
Limited English proficient (LEP) individuals are defined as people who either do not speak English well or do not speak any English. Language difficulties create substantial barriers to accessing employment opportunities, engaging in community or cultural activities, and performing daily tasks. Because they do not speak English well, LEP individuals tend to work lower-wage jobs and are more likely than the general population to have limited incomes.

In Northwest Louisiana, more than half of LEP individuals are low-income. Because of this lower-income status, LEP individuals are more likely to depend on public transportation as the cost of owning a vehicle is too expensive. According to the 2011 American Community Survey, more than 11 percent of LEP individuals reported public transportation as their primary means of getting to work compared to 8 percent for fluent English speakers. In addition, many LEP individuals also face barriers in accessing transportation information resources, which can prevent them from utilizing the transportation options that do exist.
## Figure 5 – Population Estimates of Persons with Limited English Proficiency

<table>
<thead>
<tr>
<th>Parish</th>
<th>Speak Spanish</th>
<th>Speak Other Indo-European languages</th>
<th>Speak Asian and Pacific Island languages</th>
<th>Speak Other languages</th>
<th>Population 5 years and over</th>
<th>Speak English only or speak English &quot;very well&quot;</th>
<th>Speak English less than &quot;very well&quot;</th>
<th>Percent speak English only or speak English &quot;very well&quot;</th>
<th>Percent speak English less than &quot;very well&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>148</td>
<td>81</td>
<td>0</td>
<td>0</td>
<td>13,179</td>
<td>13,116</td>
<td>99.5%</td>
<td>63</td>
<td>0.5%</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>4,435</td>
<td>1,214</td>
<td>1,351</td>
<td>473</td>
<td>114,343</td>
<td>111,597</td>
<td>97.6%</td>
<td>2,746</td>
<td>2.4%</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>3,979</td>
<td>2,619</td>
<td>1,857</td>
<td>496</td>
<td>236,334</td>
<td>233,072</td>
<td>98.6%</td>
<td>3,262</td>
<td>1.4%</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>165</td>
<td>119</td>
<td>13</td>
<td>22</td>
<td>15,788</td>
<td>15,754</td>
<td>99.8%</td>
<td>34</td>
<td>0.2%</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>436</td>
<td>168</td>
<td>63</td>
<td>0</td>
<td>25,255</td>
<td>24,945</td>
<td>98.8%</td>
<td>310</td>
<td>1.2%</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>912</td>
<td>672</td>
<td>509</td>
<td>247</td>
<td>44,573</td>
<td>43,426</td>
<td>97.4%</td>
<td>1,147</td>
<td>2.6%</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>336</td>
<td>245</td>
<td>119</td>
<td>135</td>
<td>36,803</td>
<td>36,528</td>
<td>99.3%</td>
<td>275</td>
<td>0.7%</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>44</td>
<td>48</td>
<td>0</td>
<td>0</td>
<td>8,211</td>
<td>8,159</td>
<td>99.4%</td>
<td>52</td>
<td>0.6%</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>318</td>
<td>189</td>
<td>57</td>
<td>11</td>
<td>22,647</td>
<td>22,449</td>
<td>99.1%</td>
<td>198</td>
<td>0.9%</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>449</td>
<td>148</td>
<td>52</td>
<td>0</td>
<td>38,047</td>
<td>37,795</td>
<td>99.3%</td>
<td>252</td>
<td>0.7%</td>
</tr>
</tbody>
</table>

*2011-2015 American Community Survey 5-Year Estimates, S1601: LANGUAGE SPOKEN AT HOME*
Zero-car household data provides a snapshot of the number of people who either cannot afford car ownership or choose to not own a car. Transportation-disadvantaged populations include both groups because even those who choose not to own a car may be vulnerable in an emergency. In the ten-parish region, Red River Parish has the highest percentage of zero-vehicle households.

Figure 6 – Population Estimates of Zero-Vehicle Households

<table>
<thead>
<tr>
<th>Parish</th>
<th>Total Workers 16 years and over in households</th>
<th>No vehicle available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bienville Parish</td>
<td>5,054</td>
<td>183</td>
</tr>
<tr>
<td>Bossier Parish</td>
<td>58,120</td>
<td>1,308</td>
</tr>
<tr>
<td>Caddo Parish</td>
<td>107,592</td>
<td>5,363</td>
</tr>
<tr>
<td>Claiborne Parish</td>
<td>5,403</td>
<td>368</td>
</tr>
<tr>
<td>De Soto Parish</td>
<td>10,372</td>
<td>312</td>
</tr>
<tr>
<td>Lincoln Parish</td>
<td>19,600</td>
<td>1,310</td>
</tr>
<tr>
<td>Natchitoches Parish</td>
<td>14,302</td>
<td>795</td>
</tr>
<tr>
<td>Red River Parish</td>
<td>3,159</td>
<td>193</td>
</tr>
<tr>
<td>Sabine Parish</td>
<td>8,361</td>
<td>247</td>
</tr>
<tr>
<td>Webster Parish</td>
<td>15,001</td>
<td>636</td>
</tr>
</tbody>
</table>

2011-2015 American Community Survey 5-Year Estimates, B08141: Means of Transportation to Work
A Closer Look

Unmet Needs of the Transportation-Disadvantaged

A closer look at the location of people with known transportation-disadvantaged characteristics shows locations where public transportation services are most needed. Figure 7 illustrates which parts of the region have service deficiencies and which areas have adequate service capacity to meet current demands. Analysis was conducted for each census tract with service-dependent populations and data was normalized with the number of persons per acre.

Many types of enhanced mobility services exist, but the Americans with Disabilities Act (ADA) complementary paratransit services provide the greatest number of one-way trips. Federal regulations require that each transit provider operating fixed-route services must also provide ADA-complementary paratransit service for any person with a disability whose trip origins and destinations fall within three-quarters of a mile on either side of any local fixed-route service. Regulations define minimum service thresholds for this service to be considered equivalent to the fixed-route service it complements. ADA-complementary paratransit services are demand-response services, and passengers generally schedule door-to-door trips through a call center.

Federal law requires that the Coordinated Plan identify needs and gaps in the special needs transportation network. The needs and gaps outlined below were assessed throughout the planning process through outreach to transportation providers and local mobility coalitions. In addition, human services providers gave invaluable insight into the needs and gaps throughout the special needs transportation network. The intent was to inform the creation of strategies that will guide transportation and information service providers in overcoming these gaps. These strategies can be found in the next chapter of this plan — “Mobility Tomorrow.”

Transportation needs differ among special needs transportation populations – senior, low-income, and individuals with a disability. At the most basic level, all residents of the ten-parish region need to access daily necessities without an undue financial or time burden. However, each individual’s unique transportation needs are shaped by a variety of factors, including but not limited to where they live and work, personal or cultural obligations, and medical conditions.

Through consultation with human service transportation providers and local coalitions in the region, the following transportation needs have been identified for the region’s special needs transportation populations:

- Affordable transportation options.
- Reliable transportation.
- Safe and secure transportation.
- Reliable public transportation outside of peak hours.
- Clear information on available transportation options.
Gaps in Service

Gaps in the special needs transportation network have been identified as falling into one of the following five categories: spatial, temporal, institutional, infrastructure, or awareness. This section of the Coordinated Plan explains each gap in greater detail and identifies the specific gaps in the region. Each gap was either identified through outreach to human service transportation providers and local mobility coalitions or was carried over from the previous Coordinated Plan.

Spatial Gaps

Spatial gaps refer to locations that are underserved, or not served at all, by transportation services. To be cost-efficient, public transportation service is oriented towards serving the region’s urban centers and major employment centers. This type of service provision creates spatial gaps in suburban and rural locations where transit service is either unavailable or inadequate to meet the daily needs of special needs populations. For special needs transportation populations, these gaps can be especially disruptive as alternative transportation options may not be available.

Spatial Gaps in Northwest Louisiana

- Transit service reductions have made it increasingly difficult to connect rural clients and riders to areas well served by fixed-route transit.
- Transit service to destinations outside of major activity centers is inadequate to meet the needs of special needs populations.
- Direct transit service between medical facilities in the region is lacking. This is especially problematic for patients who need to travel between multiple medical facilities in one day.

Temporal Gaps

Temporal gaps are caused when transportation service is not available at times when it is needed by special needs transportation populations. With public transit’s commute-hour focus, a substantial portion of the region’s transit service does not operate early enough in the morning or late enough in the evening for low-income individuals on alternative work schedules.

Temporal Gaps in Northwest Louisiana

- Transportation options are inadequate outside of peak hours — very early in the morning, middle of the day, after 7 p.m., and on weekends.
**Institutional Gaps**

Institutional gaps are caused by the rules, regulations, and requirements that govern transportation service provision. Many institutional gaps go unnoticed by riders and clients, yet can inadvertently create obstacles to their mobility. Institutional gaps are not always clearly defined and can take many forms.

**Institutional Gaps in Northwest Louisiana**

- Paratransit systems generally do not provide same-day service, which means riders must always plan trips in advance and cannot be spontaneous about travel.
- Common standards do not exist among agencies, including but not limited to vehicle safety, driver training, and driver licensing.
- Transportation providers do not group trips or offer shared rides among different special needs populations. This can result from eligibility requirements preventing shared trips, perceived increased liability, or an agency’s concern that funding will be jeopardized if they transport someone who is not their client.
- It is challenging for new projects to compete for funding. As a result, new projects that effectively respond to recent changes in the special needs transportation landscape (e.g., transit service reductions) may not get off the ground.
- Cross-parish trips within and outside of the ten-parish region are difficult due in part to a lack of coordination among service providers.
- Transfer between different special needs transportation services is cumbersome and may result in additional wait time for a customer to complete a trip.

**Infrastructure Gaps**

Infrastructure gaps are areas where a lack of physical or technological infrastructure prevents individuals from accessing needed transportation options. Infrastructure gaps can take the form of a major roadway acting as a barrier to accessing daily necessities, a lack of sidewalks adjacent to transit stops, or intersections not meeting ADA standards.

**Infrastructure Gaps in Northwest Louisiana**

- Transit facilities and bus stops without accessible walkways and safe crossings.
- Sidewalk ramps that are not level or too steep.
- Bus stops and other transportation waiting areas lack benches.
- Bus stops lack adequate weather protection.
- Rural and suburban roads are unsafe for pedestrian and wheel chair users.
- Special needs populations have limited access to new travel information resources, including mobile and web-based applications.
A Closer Look

- Public spaces lack amenities for seniors and individuals with disabilities.
- Pedestrian crossing times at signalized intersections are not long enough for seniors, children, and individuals with mobility impairments.
- Lack of affordable, accessible, or lift-equipped vehicles for people who are disabled, but who are not eligible for Medicaid or ADA paratransit services.

Awareness Gaps

Learning how to access and utilize transportation options can be a daunting task for individuals unfamiliar with all transportation programs and services available in the region. Gaps in awareness occur when individual riders and social service agencies are not fully informed on available transportation options. While awareness gaps can take many forms, they all stem from a lack of information.

Awareness Gaps in Northwest Louisiana

- Language and cultural barriers prevent riders from accessing transportation options.
- Traveler information technologies are too advanced or difficult to acquire for some users.
- Social service agencies do not always have adequate information regarding available transportation choices for their clients, particularly if transportation is not offered by the social service agency. This may result in referral to less efficient transportation options than those that are available.
- Fixed-route transit is marketed to commuters and not to special needs populations. Furthermore, funding is not available to meet the demand for specialized paratransit, volunteer and other community transportation, and hence marketing is not encouraged.
- Rural communities are not aware of available transportation options due to limited funding available for marketing and coordination.
- Misinformation and unfounded fears create a negative perception of transit among older populations.
- Decision makers do not have full knowledge of where special needs populations reside in their community and may not be fully aware of their mobility needs.
- Special needs populations are not aware of all available information resources.
- There is no access to transportation option information available online.

Duplications

Demand for transportation service is increasing among special needs populations, competition is growing for limited funding opportunities, and substantial cuts to fixed-route transit service have occurred throughout the region. Each of these facts makes it increasingly difficult for special needs transportation providers to meet demand for their services. In some cases, duplicative
services fill gaps where available options are inadequate to meet demand. However, there are instances where removing duplications could improve delivery of special needs transportation service. Various funding sources restrict different transportation services to specific populations for specific purposes. This results in service duplication and redundancy in multiple areas.

**Examples of Duplications**

- Vehicles from different agencies may be traveling in the same corridor at the same time, but may be offering different services or serving different populations and cannot pick up additional riders.
- Public transit agencies and Medicaid brokers operating separate but similar training programs for drivers.
- Public transit systems and other transportation providers having their own in-house maintenance programs for vehicles when they could take advantage of economies of scale by combining resources.
- Human service agencies, transit systems, senior programs, and other agencies each having their own call center for people to call to arrange for transportation instead of having a one-stop shop.
- Each transportation system has different eligibility requirements. A person who may qualify for more than one type of service may need to apply for several different programs with each having different requirements and processes.

**Challenges**

**Suburbanization of Poverty**

Populations that most often need public transportation, especially low-income residents, are no longer heavily concentrated in the region’s urban core where transit services are more plentiful. The region is experiencing a suburbanization of poverty, similar to many peer metropolitan areas. The suburban-style development patterns create challenges for convenient transit services. One of the greatest current and future challenges is responding to the region’s public transportation service needs.

**Funding**

Financial challenges further compound the difficulty of providing reliable transit services in the region. State and federal resources have largely funded the construction of road and highway infrastructure in the region, with less significance placed on long-term operations and maintenance costs. However, the expansion of public transit and enhanced mobility service has not received the same level of continuous funding. Funding for operations and maintenance of
services is particularly difficult to come by, and a dedicated local funding source is typically required.

An Aging Population

With an aging demographic, the Northwest Louisiana ten-parish region is – and will continue to be – faced with an increasing demand for more transit and on-demand specialized, paratransit services in the coming years. Currently, older adults who cannot use fixed-route transit service have very few affordable transportation alternatives. Although more than 40 transportation services work to meet the needs of disadvantaged populations, including older adults, some limitations exist due to inadequate capacity, high costs, narrow geographic service coverage and limited hours of operation. Evaluation of service availability and the locations of transit-dependent population locations are steps toward progress. A collaborative assessment of public transit needs has been undertaken through a peer exchange among many service providers in the region. Stakeholder input from users and providers suggests that the unmet need is great, and the gaps between needs and available capacity will continue to climb as the region’s population ages and disperses, as life expectancies increase, as the population of the infirm and disabled increases, and as income gaps widen.
This chapter serves to outline the region’s approach for moving forward with coordinated transportation planning in Northwest Louisiana. The plan’s Vision and Mission provide a high-level summary of what the region is trying to achieve with coordinated planning. The primary intent of the Future Mobility chapter is to guide implementation of this vision and mission via the Coordinated Plan’s goals and prioritized strategies. These goals and prioritized strategies are intended to address the needs, gaps, and duplications in the special needs transportation network identified in this plan. To that end, they guide regional special needs transportation investment decisions, particularly for the federal programs.

The mission of the Coordinated Public Transit Human Services Planning Committee is to work collaboratively to improve transportation services for persons with lower incomes, older adults, and individuals with disabilities by identifying needs, understanding resources, maximizing access and mobility, and minimizing costs for the entire community.

To ensure that existing and new transportation services are meeting the needs of the region’s special needs populations, agencies and organizations involved in special needs transportation will need to continue coordinating and planning efforts in an effective manner to deliver their services. At the same time, the region will need to become increasingly innovative in delivering transportation services while working to preserve the essential transportation programs that currently serve special needs populations.

NLCOG promotes and maintains an open dialogue among local transportation funding agencies, providers, and human service agencies by facilitating discussions at the regional and local levels. NLCOG is also responsible for developing and updating the Coordinated Plan. The Coordinated Plan serves as the unified, comprehensive strategy for human services and special needs transportation service delivery. However, transportation for the region’s special needs populations is woven into many of NLCOG’s planning efforts, including Mobility 2040 Long Range Transportation Plan.

Mobility 2040 Long Range Transportation Plan Update

Long range transportation planning is a cooperative process conducted by the Metropolitan Planning Organization (MPO), in coordination with the Louisiana Department of Transportation and Development (LADOTD), transit operators, numerous stakeholders from throughout the region, and the public to create a vision for the future of the community. The process, which is prescribed by federal regulations, is designed to assist the MPO in prioritizing short- and long-term investments in the regional transportation system over the next 25 years through a proactive public participation process that involves all users of the transportation system.

NLCOG, the MPO for Bossier and Caddo Parishes, initiated an update to the Long Range Transportation Plan (LRTP) in June 2014. During the development of Mobility 2040,
several rounds of public and stakeholder meetings were conducted, technical data was analyzed, existing plans and studies were compiled and reviewed, and potential projects were evaluated according to community goals and performance based criteria.

In relation to public transportation, NLCOG distributed a survey to the service providers in Northwest Louisiana about some of the challenges these organizations face in providing transportation to rural and transit dependent populations within the area.

Respondents indicated that a lack of adequate funding, as well as reconciling the priorities and agendas of various service providers, were the biggest obstacles to mobility in the area. Furthermore, respondents see customer needs being adequately met, but that they could be met more cost effectively, and that one possible role providers could play in improving regional transportation services could be to offer data on the transportation needs of individuals with disabilities. In addition, a geospatial analysis was used to identify areas of service demand in rural parts of Bossier and Caddo Parishes and areas where service providers are concentrated, to identify likely transportation origins and destinations for populations depending on these demand responsive transit services.

Stakeholders

The Coordinated Plan was developed considering the principles and values of the stakeholders involved in special needs transportation: riders, transportation providers, and the community at large. Each of these stakeholder groups has different principles and values, depending on their viewpoint. These viewpoints have been balanced throughout planning efforts and the building of a coordinated special needs transportation system in the region.

Riders

People who need transportation, including those with physical and mental disabilities, youth, older adults, and people who simply can’t afford to own or maintain a car, or are unable to operate a vehicle.

Riders Value:

- Choice: A range of mobility options that are usable, effective, and affordable.
- Easy: The ability to easily plan, arrange, and pay for trips, regardless of mode.
- Reliability: Transportation services that dependably arrive and depart within predictable timeframes.
- Safety: Transportation services that are safe and secure with drivers who are respectful and helpful.
- Service: Sufficient service levels to meet needs.
Future Mobility

- Privacy: Confidentiality and respect regarding how their personal information is used.

Transportation Providers

Agencies that arrange and provide the trips, including transit agencies, school districts, transportation brokers, nonprofits, private transportation companies, volunteer driver programs, community shuttles, and social service agencies.

Transportation Providers Value:

- Fairness: Fair competition among those providing publicly funded rides.
- Simplicity: Simple and streamlined procedures for collecting fares, reporting data, and complying with regulations.
- Information: The ability to help people access different transportation programs without having to know the details about each program.
- Shared Resources: Leveraging opportunities to share resources with other providers, such as vehicles, training, maintenance, and drivers.
- Inclusion: Accessible communities with a full range of mobility options.
- System Approach: Sharing the responsibility of transportation with the community.
- Accountability: Community accountability for working together to meet mobility needs.
- Coordination: Coordinating transportation to ensure the least amount of work by riders.

Communities at Large

Those who serve people with special transportation needs, including hospitals, nursing homes, colleges and universities, pharmacies and medical facilities, retail and grocery stores, community programs, family and friends, government agencies, and employers.

Goals, Objectives, and Strategies

The goals, objectives and strategies within the Coordinated Plan support the overall mission statement for coordinating special needs transportation in the ten-parish region of Northwest Louisiana. To continue to move the region closer to the vision of mobility, quality, and efficiency through regional coordination, this plan lays out five overarching goals and corresponding strategies. For each goal, a series of desired objectives have been identified which will serve to gauge progress in implementing the plan. The following goals and strategies will guide improvements to the region’s public transportation and enhanced mobility services.
Goal #1 – Move people efficiently by increasing capacity to serve unmet needs.

To meet current and future demand, the region must develop the capacity to deliver more trips within a constrained funding environment. In order to stretch limited transportation dollars further, the region’s transportation providers to deliver.

Objective – Improve our ability to determine need for transit services across the ten-parish region while eliminating duplications and closing gaps.

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Who will lead</th>
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<tbody>
<tr>
<td>Determine what data is being collected</td>
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<td>Conduct needs assessment through existing agencies</td>
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<td>Develop a plan for collecting data needed in a systematic format</td>
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<tr>
<td>Identify duplications, service gaps, underused assets, and coordination options</td>
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Desired Outcomes

- More mobility options for special needs populations.
- Increased geographic coverage of transportation services.
- Increased availability of transportation options outside of peak transit hours.
- Improved cross-jurisdictional connections.
- Improved access to transportation options and common destinations.
- Improved functionality of special needs transportation programs and services.
- Innovative approaches to service delivery and coordinated planning.
- More cost-efficient transportation options.
- Improved transportation reliability for special needs populations.
Goal #2 – Put people first by making services more easily understood and accessible by all riders, including current and future. People should be able to afford transportation, use it safely, and get to where they need to go without an overly burdensome process or trip time. Providers should ensure fairness, justice, and equity in delivering transportation programs and services.

Objective – Build awareness and encourage greater use of the available transit services by developing marketing, communication and education programs.

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<thead>
<tr>
<th>Strategies</th>
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<tr>
<td>Determine what marketing strategies are currently being used by providers</td>
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<td>Identify marketing and consumer education “best practices”</td>
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<td>Develop a coordinated marketing strategy</td>
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<tr>
<td>Conduct consumer education and travel training programs for the public</td>
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**Desired Outcomes**

- Effective travel instruction programs that familiarize special needs populations with available transportation options.
- Easier to use transportation services and information resources.
- Innovative traveler information resources for special needs populations.
- Targeted marketing and travel instruction for special needs populations.
- Greater transportation independence for individuals with limited mobility options.
Goal #3 – Move more people by ensuring that the coordination process is comprehensive and sustainable.

Resources for regional special needs transportation should be maximized through coordination in planning, service delivery, and reporting. Networks should be created that are seamless for the customer, but operationally and organizationally sound for providers. Coordination creates efficiencies that enable more trips within available funds. Coordinating regional trips offers the greatest potential for efficiency, with fewer vehicles on the road and more people on each vehicle. Agencies can also coordinate such things as driver training, purchasing, standards, requirements, eligibility determinations, and technology.

Objective – Define the need for change and articulate the vision for delivery of coordinated transportation services.

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<th>Strategies</th>
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<td>Build dialogue skills</td>
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<td>Develop shared definition of terms</td>
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<td>Meet quarterly to discuss coordination possibilities and share information</td>
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<td>Gather support among officials, agency administrators, and community leaders</td>
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<tr>
<td>Create new and maintain existing partnerships that address the needs and gaps identified in this plan.</td>
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Desired Outcomes

- Better accounting of special needs transportation costs and benefits in state, regional, and local planning efforts.
- Improved resource coordination among existing transportation providers.
- Increased stakeholder coordination.
Goal #4 – Improve the quality of services provided to both special needs populations and the general public, in both the urban and rural environments.

With multiple human services organizations and transportation providers in the region working together for the shared benefit of the community as a whole, to eliminate duplications, expand services, and improve the quality of services in order to better address the regional transportation needs of the transportation disadvantaged people in Northwest Louisiana.

Objective – Increase public participation in evaluating services.

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<th>Strategies</th>
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<tr>
<td>Survey riders on existing systems as to quality of service and areas needing improvement</td>
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<td>Hold public meetings on coordinated plan</td>
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Desired Outcomes

- More affordable transportation options for special needs populations.
- Improved transportation reliability for special needs populations.
- Easier to use transportation services and information resources.
- Faster trips made by special needs populations.
- Improved accessibility at passenger facilities for special needs populations.
- Improved functionality of special needs transportation programs and services.
- Innovative approaches to service delivery and coordinated planning.
Goal #5 – Create a more cost effective delivery system to move people throughout the community efficiently, safely and securely.

Through a fair and equitable transportation system, special needs populations, transportation disadvantaged communities, and the general public can realize a higher quality of life.

Objective – Develop a method for prioritizing coordination activities.

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<th>Strategies</th>
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<tr>
<td>Collaboratively develop a set of proposed prioritization criteria</td>
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<td>Solicit input from the public on criteria</td>
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**Desired Outcomes**

- Efficient use of existing special needs transportation resources.
- Fewer duplications in service and program delivery.
- Better assessment of program and service efficacy.
- Better use of limited resources as client and rider needs evolve.
- Common standards for service and program operations.

**Implementation of Goals, Objectives, and Strategies**

The goals, objectives, and strategies will be implemented through a wide range of services and programs. These transportation services and programs cover the range of mobility options necessary for those needing transportation:

- Fixed-route bus service
- ADA paratransit
- Demand response
- Shared rides
- Program transportation (including school buses)
- Volunteer programs
- Travel training programs
- Technology
- Language assistance
Financial subsidies
Information, referral, and assistance

Many factors influence the program or service. Everything must be taken into consideration when developing, implementing, and operating services and programs, including an individual’s specific need, geographic area, destination, costs, and existing transportation options.

Measuring Success

Performance measures aid agencies and planners in measuring success of the various transportation programs.

- Gaps in service filled through the provision of transportation options that would not otherwise be available for seniors and individuals with disabilities measured in numbers of seniors and individuals with disabilities afforded mobility they would not have without program support.
- Modification to geographic coverage of transportation service, the quality of transportation service or service times that increase the availability of transportation services for seniors and individuals with disabilities.
- Actual or estimated numbers of rides (as measured by one-way trips) provided annually for seniors and individuals with disabilities on Section 5310 supported vehicles and services, those in rural areas, and the transportation-disadvantaged.
- Accessibility improvements such as additions or changes to environmental infrastructure (e.g., transportation facilities, sidewalks, etc.), technology, and vehicles that impact availability of transportation services as a result of projects implemented in the current reporting year.
- Other measures, as the planning committee determines appropriate.

While each funded project is expected to identify outcomes and measurements of performance, the overall performance indicators for coordinated transportation in the ten-parish region of Northwest Louisiana will continue to focus on the following measures:

Quality Measures

- Number of seniors and individuals with disabilities afforded mobility they would not have without program support.
- Transportation service customer comments.
- Vehicle dwell times.
- Customer wait time (at beginning of trip, and for transfers).
- Accident reports.
Future Mobility

- Ability for the transportation dependent to meet medical, employment, and social needs.
- Ability for seniors and people with disabilities to remain independent.
- Rider satisfaction.

**Efficiency Measures**

- Average cost per trip, including administration and capital depreciation.
- Average cost per mile, including administration and capital depreciation.
- Average number of passengers per hour or per day.
- Level of integration in other plans.

**Mobility Measures**

- Actual or estimated numbers of rides provided annually.
- Number of people using public transportation in the region, by mode.
- Number of public transportation trips in the region, by mode.
- Ratio of trips to population density, by mode and area (rural and urban).
- Transportation referenced as a barrier in human service needs assessments.
- Additions or changes to environmental infrastructure (e.g., transportation facilities, sidewalks, etc.), technology, and vehicles that impact availability of transportation services as a result of projects implemented in a grant funding cycle.

**Next Steps**

Special needs transportation is an integral part of the long-range transportation vision. Federal transportation legislation requires that the Coordinated Plan be updated every four years. This Plan covers federal fiscal years 2017 to 2020. In addition to the regional planning efforts of NLCOG, the members of the ten-parish regional Coordinated Public Transportation – Human Services Transportation Planning Committee has the primary responsibility to assess the needs of their local community and current transportation network and provide recommendations to improve the system, serving as the first step towards improvement. This local information is provided to NLCOG in its updates to the Coordinated Plan.

Further, this group serves an important role in the coordination of special needs transportation services, where they may use a combination of federal, state, and local funds to provide services to meet needs and fill gaps that exist. While there may not be a reliable way to include demand-response trips into traditional travel demand models, this does not mean that NLCOG cannot use other quantitative and qualitative approaches to provide useful data for special needs transportation planning. Going forward, NLCOG intends to leverage available resources and utilize the Special Needs Transportation Committee to obtain special needs transportation data that will enhance coordination and planning efforts.
The Northwest Louisiana Council of Governments is an intergovernmental association of local governments established to assist in planning for common needs, cooperating for the mutual benefit, and coordinating for sound regional development. NLCOG’s purpose is to strengthen both the individual and collective power of local governments and to help them recognize regional opportunities, eliminate unnecessary duplication, and make joint decisions for the benefit of the entire Northwest Louisiana community. This is achieved by developing and implementing constructive and workable policies and programs for solving area-wide problems. These issues include, but are not limited to, matters affecting transportation, economic, health, safety, welfare, education, and regional development issues.

NLCOG is funded by a variety of funding sources including federal grants from the U.S. Department of Transportation’s Federal Highway Administration, and Federal Transit Administration, the Louisiana Department of Transportation and Development, as well as by NLCOG’s local member governments.

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Coordinated Public Transit Human Services Planning Committee

DEFINITIONS FOR HUMAN SERVICES PROGRAMS


Community Transportation: Transportation services provided by or on behalf of a human service agency to provide access to agency services and/or to meet the basic, day-to-day mobility needs of transportation-disadvantaged populations, especially individuals with disabilities, older adults, and people with low incomes.

Coordinated Plan: see “Coordinated Public Transportation-Human Services Transportation Plan.”

Coordinated Public Transportation-Human Services Transportation Plan: A plan that identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes, provides strategies for meeting those local needs, and prioritizes transportation services for funding and implementation.

Discrimination – An act or inaction (whether intentional or unintentional) through which a person in the U.S. solely because of their race, color, national origin, sex, age, disability, or low-income is subjected to disparate unequal treatment or impact in any program or activity receiving Federal financial assistance.

Elderly Individual: Includes, at a minimum, all persons 65 years of age or older.

Eligible Applicant: Private non-profit organizations, state or local governmental bodies, and operators of public transportation services.

Eligible Low-income Individual: Refers to an individual whose family income is at or below 150% of the poverty line (as that term is defined in Section 673(2) of the Community Services Block Grant Act (42 U.S.C 9902(2), including any revision required by that section) for a family of the size involved.

Enhanced Mobility of Seniors and the Disabled Program (Section 5310): FTA formula program for public transportation capital projects planned, designed, and carried out to meet the special needs of elderly individuals and individuals with disabilities. 49 U.S.C. 5310

Federal Transit Administration (FTA): FTA is the agency of the USDOT which administers the federal program of financial assistance to public and specialized transit.

Fixed-Route: Service provided on a repetitive, fixed-schedule basis along a specific route with vehicles stopping to pick up and deliver passengers to specific locations; each fixed-route trip serves the same origins and destinations, unlike demand-response.
Fixing America’s Surface Transportation Act (FAST ACT): which was signed into law on December 4, 2015, to provide long term guaranteed Federal funding for highways, highway safety, and public transportation.

Grant: An award of financial assistance, including cooperative agreements, in the form of money, or property in lieu of money, by the Federal Government to an eligible recipient. Used interchangeably with Grant Agreement.

Human Service Transportation: Transportation services provided by or on behalf of a human service agency to provide access to agency services and/or to meet the basic, day-to-day mobility needs of transportation-disadvantaged populations, especially individuals with disabilities, older adults, and people with low incomes.

Individuals with a Disability: An individual, who, because of illness, injury, age, congenital malfunction, or other incapacity or temporary or permanent disability (including an individual who uses a wheelchair or has semi-ambulatory capability), who cannot use effectively, without special facilities, planning, or design, public transportation service or a public transportation facility.

Job Access and Reverse Commute Program (JARC) (Section 5316): FTA formula grant program for projects relating to the development and maintenance of transportation services designed to transport eligible low-income individuals to and from jobs and activities related to their employment. The program is also for public transportation projects designed to transport residents of urbanized areas and non-urbanized areas to suburban employment opportunities.

Mobility Management: Consists of short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers carried out by a recipient or sub-recipient through an agreement entered with a person, including a government entity, under 49 U.S.C. Chapter 53 (other than Section 5309). Mobility management funding does not include operations of public transportation services.

New Freedom Program: FTA formula grant program for new public transportation services and public transportation alternatives beyond those required by the ADA of 1990 (42 U.S.C. 12101 et seq.) that assists individuals with disabilities with transportation, including transportation to and from jobs and employment support services. 49 U.S.C. 5317

Non-profit Organization: A corporation or association determined by the Secretary of the Treasury to be an organization described by 26 U.S.C. 501(c) which is exempt from taxation under 26 U.S.C. 501(a) or one which has been determined under State law to be non-profit and for which the designated State agency has received documentation certifying the status of the non-profit organization.

Non-urbanized area: Any area outside of an urbanized area. The term “nonurbanized area” includes rural areas and urban areas under 50,000 in population not included in an urbanized area.

Person with a Disability (FTA’s Definition): Any individual who, by reason of illness, injury, age, congenital malfunction, or other permanent or temporary incapacity or disability, is unable to utilize public transportation facilities and service effectively without special facilities or equipment.

Person with a Disability (ADA Definition): Any individual with a disability who is unable, as the result of a physical, mental or vision impairment, to independently board, ride and/or disembark from an accessible vehicle. This includes individuals with mental or visual impairments who cannot recognize destinations,
understand transfers, or distinguish between vehicles at transfer stations. Any individual with a disability who needs the assistance of a wheelchair lift or other boarding assistance device and is able, with such assistance, to board, ride, and disembark from any accessible vehicle. Any individual with a disability who has a specific impairment-related condition that prevents such individual from traveling to a boarding location or from a disembarking location on an accessible system.

Public Transportation: Surface transportation by a conveyance that provides regular and continuing general or special transportation to the public, but does not include school bus, charter, or intercity bus transportation or intercity passenger rail transportation provided by AMTRAK.

Reverse Commute Project: Refers to public transportation project designed to transport residents of urbanized areas and other than urbanized areas to suburban employment opportunities.

Rural Area: An area with low population and density outside the boundaries of an urban area. However, the term rural is commonly used to refer to all areas other than urbanized areas.

Rural Public Transportation Program (Section 5311): FTA formula grant program that provides funding to states for the purpose of supporting public transportation in areas of less than 50,000 populations.

Safe, Accountable, Flexible and Efficient Transportation Equity Act - A Legacy for Users (SAFETEA-LU): This authorizing resolution, signed on August 10, 2005 by President Bush, guarantees $286.4 billion in funding for federal surface transportation programs over six years (through FY 2009).

Small Urbanized Area: An area that has been defined and designated in the most recent decennial Census as an “urbanized area” by the Secretary of Commerce. Small urbanized areas as used in the context of FTA formula grant programs are urbanized areas with a population of at least 50,000, but less than 200,000.

Title 49, CFR part 21 (Department of Transportation Regulations for the implementation of Title VI of the Civil Rights Act of 1964): Requires assurance from States that no person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the recipient receives Federal assistance from the USDOT, including the Federal Highway Administration.

Urbanized Area: An area encompassing a population of not less than 50,000 people that has been defined and designated in the most recent decennial Census as an “urbanized area” by the Secretary of Commerce. Urbanized areas as used in the context of FTA formula grant programs are areas with a population over 200,000.

Welfare Recipient: Refers to an individual who has received assistance under a State program funded under part A of Title IV of the Social Security Act at any time during the three-year period before the date on which the applicant applies for a grant under JARC.
Coordinated Public Transit Human Services Planning Committee

ELEMENTS OF A MEMORANDUM OF UNDERSTANDING

How to Develop a Memorandum of Understanding

A Memorandum of Understanding (MOU) is a document that describes an agreement between two organizations that outlines planned actions. An MOU is used when planning a long-range project that requires an action plan. The MOU serves as a guideline in completing a project between two organizations.

An MOU helps smooth out any potential issues at the outset and ensures all partners have the same understanding. The MOU is a non-binding, mutually beneficial agreement with a partner body. It sets out a statement of responsibilities, activities, outcomes, and lead contacts between the parties involved.

An MOU can either be generated by the organization that will complete work or can be generated by the organization that is requesting work. The MOU may be reviewed by key leaders of each organization to make certain that there is no conflict of interest. An MOU should be developed only after both organizations have communicated needs and plans for the project. The MOU serves as a final agreement based on those discussions. The MOU will ensure all partners have the same understanding and provide a reference point throughout the project.

An MOU usually includes the following elements:

- Identification of both organizations and contact information for lead principals of both organizations
- Purpose of the project that is to be completed, including the project background and if it is part of a larger program
- Procedures for implementing the project
- Timelines in which the project is to be completed
- Resources, if needed, to complete the project.
- Key responsibilities of each party
- Financial obligations (if applicable) such as where funding originates, what it covers, and how it will be distributed, as well as who is responsible for budget management
- A statement allowing for adjustments or additions to the MOU.
- Any disclaimers that should be considered as part of completing the project.
- Signed agreement of both principal leaders of each partnering organization
Public Transportation Travel Training Program

Policy and Agency Template

Adopted XXX 2017
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Travel training for older adults and individuals with special needs, as well as the general public, has become more common as it encourages greater ridership using conventional public transit services, and because transferring ridership from paratransit to conventional public transit can potentially decrease overall transit system operating costs. At the same time, there is interest in improving the quality of life for all – expanding opportunities for increased mobility and continued independence for those not otherwise constrained by physical and cognitive disabilities.

Understanding how effective travel training can increase ridership, what barriers have to be overcome, and what elements of travel training programs are linked to greater success among different groups of individuals. For those interested in increasing the mobility of older persons and persons with disabilities it is important to learn more about how public transportation can meet their travel needs when and where possible.

The fundamentals of any travel training program must address how to reach out to affected communities to draw users in, as well as how to identify and present benefits and costs of training in support of program implementation. Providing low-cost travel alternatives for senior riders, those without access to reliable transportation, and those with disabilities can increase their travel flexibility, independence, choices, and quality of life.

Objectives of Travel Training Programs

Mobility is central to our lives. To work, shop, get medical care, worship, enjoy educational and recreational opportunities, or see friends and family, we need transportation. For many of these trips, most us drive or ride with someone.

For people without regular or reliable use of a car, other travel options are needed to fulfill their travel needs. By educating people about other options, travel training has the potential to maintain or improve the mobility of older adults, people with disabilities, and others who are not able to drive or have someone else drive for them. Travel training can help anyone start using public transportation or use it more effectively. While clearly not “the one answer” for the travel needs of all, travel training is a potent tool in the arsenal of strategies for improving or maintaining the mobility of a community.

Travel training offers the promise of improving the mobility of a community while also helping public transit agencies control their costs. The importance of this promise stems from living in an automobile-oriented society where many citizens are not familiar with the benefits of traveling by public transportation or with the procedures and requirements for using available public transit services. Real or perceived barriers to using public transit may be reducing the mobility and the quality of life for older adults and those with disabilities who are facing issues that interfere with independent travel.
Introduction

At the same time, many public transit agencies are facing severe resource constraints and need assistance in increasing the cost effectiveness of their services. Therefore, travel training can assist in achieving the following objectives:

- Increasing independent mobility and tripmaking.
- Reducing travel time and cost, and improving connections.
- Increasing the use of fixed route transit services.
- Saving money for riders and transit agencies by promoting lower cost alternatives to supplement Americans with Disability Act (ADA) paratransit services.
- Improved quality of life for participants.

Travel training can address and often improve some impediments to independent travel and provide enhanced access to public transportation. Travel training can also be the bridge that connects transportation-dependent individuals with the freedom to travel on their own terms. This is an important objective precisely because a significant decline in mobility can severely decrease a person’s quality of life: fewer out-of-home activities, increases in health and nutrition problems, isolation, and depression are some of the issues resulting from a lack of mobility.

Travel training programs also show promise for being effective tools for decreasing the costs of public transit programs. Programs have been promoted as potentially effective at constraining the growth of costs of ADA paratransit services, which are the most expensive form of service offered by public transit agencies.

Figure 1 – Travel Training Outcomes: A Simple Look

Potential Benefits of Travel Training

Successful travel training programs generate significant benefits. The kinds of benefits created by travel training programs can be best understood as benefits for travelers, local transportation
services, those who provide care for older adults and those with a disability, and communities. Some of the benefits are immediate and some are long term.

Benefits for Riders

Travel training provides numerous benefits for riders. It can do the following:

- Expand their travel options.
- Increase their tripmaking, leading to enhanced mobility.
- Provide improved travel attributes, such as no need to make advance reservations, less dependence on paratransit, and less dependence on family and friends for rides.
- Offer quality of life improvements, such as aging in place in their own homes or traveling spontaneously, according to individual needs or desires.
- Enhance personal development, reduce anxiety, and provide more control over one’s own activities and schedule.
- Improve social connectedness, helping people become active community members.

Staff members of several travel training programs see travel training as life affirming. Travel training can change the entire demeanor of trainees by expanding their options for getting around, thereby increasing their independence, spontaneity, and quality of life.

Benefits for Public Transit Agencies

The benefits of travel training for transit providers can be substantial.

- Because ADA paratransit services are considerably more expensive for public transit agencies to provide than fixed route transit, there can be substantial cost savings to the transit agency if travel training can encourage potential paratransit riders to use fixed route services instead. Even slowing, if not reducing, the growth in ADA paratransit services can be beneficial for transit agencies.
- Travel training can benefit transit agencies by increasing the use of public transit and contributing to a mobility options philosophy (providing people with more options).
- Travel training benefits transit providers since it encourages the use of the most appropriate and cost-effective transit options.
- A training program not only saves transit dollars, it also creates more space on paratransit vehicles for riders who have no other transit options.
- Travel training can build good will in the community for public transit.

Benefits for Caregivers

Recent studies have found that more than 90 percent of unpaid, informal caregivers for older adults provide some form of transportation assistance, usually by driving the older adults to
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destinations. Informal caregiving has been linked to poorer health and economic hardship among caregivers. Travel training has the potential to ease caregivers’ burden throughout their support network by allowing at least some of these trips to be made by bus or rail, freeing up informal caregivers for other activities and at the same time saving resources that would otherwise be spent on caring for an older adult.

Benefits for the Community

In the most general sense, travel training programs can be an essential component for a healthy community. Communities in which older adults, those with disabilities, and the general public, are unable to meet all of their transportation needs are faced with greater health care costs and a general lowering of quality of life. Research shows that when people lose mobility they are more likely to reduce spending due to a lack of access to goods and services. Travel training can help meet these mobility needs, which in turn helps the entire community.

Potential Challenges to Travel Training Programs

There will be challenges that any agency will face when developing a travel training program. Key among them are the following: funding, outreach, collaboration, effective communication of program benefits, evaluation, and infrastructure.

Funding

Funding for travel training is not ensured; a lack of funding may limit the full potential of any travel training program. It is difficult to plan for the future or expand program efforts in the absence of stable and adequate sources of funding. Travel training programs must understand how to create a scalable program that can adjust to the economy. Tracking the cost savings of travel training is important to understand how much money a program is saving the community so that arguments can be made for more funding support. Relationships with community partners are critical to the success of travel training programs because of the opportunity they afford to leverage scarce resources as well as continue to bring people in need into the program.

Outreach

Ongoing outreach is critical because bringing riders into the program can be challenging for a number of reasons, including the frequently negative media culture surrounding the use of public transit, the stigma associated with asking for assistance, and the limitations in funding and staffing that constrain the amount of outreach that is needed. Travel trainers are concerned that public transportation often receives negative publicity from local media. For example, transit safety may sometimes be reported as a much greater problem than it actually is. This negative reporting can restrict interest in using public transit, which can diminish participation in travel
training programs. An ongoing challenge for the program has been some resistance among potential riders, and often among their family members, regarding the physical challenges and potential risks of riding public bus lines. Targeting program efforts to groups or organizations is economically feasible but may miss many individuals who could benefit from the services.

Collaboration

Collaboration is essential to developing a successful travel training program. It takes time and resources to establish and nurture relationships with centers and agencies that work with seniors and those with disabilities. Another challenge in establishing a successful travel training program is the coordination across political jurisdictions and transit agencies, particularly in terms of scheduling, route connections, and fare media. Creating a collaborative working relationship with the transit agencies and with the communities and the human service agencies help the community in the long run.

To help overcome some of the challenges in establishing collaborative relationships, programs need to be flexible so that they take advantage of opportunities that arise in the community and remain responsive to the changing needs of the populations they serve. These relationships are the necessary starting point for trust, something that is central to program success.

Effective Communication of Program Benefits

The competition for public dollars requires that program benefits be communicated to public officials. This can be in the form of short reports showing results, but often is most effective with success stories. The sustainability of the program depends on adequate funding, and funding comes from success. Once the benefits are determined, then they must be communicated in an effective manner. This can be through the use of charts, tables, and oral presentations. Again, stories are a powerful tool.

Evaluation

In order for a program to be successful, evaluation criteria must be established. While collection of data is a time consuming and sometimes difficult task, in order to determine the benefits of a program, data must be available to evaluate progress. The evaluation should include financial, utilization, and “quality of life” information.

Infrastructure

Problems with the infrastructure of the public transit system in the community (e.g., having buses available, having bus stops that are accessible, having sufficient seating space) may limit who can benefit from the travel training. An individual may successfully learn to navigate the bus ride itself, but because of mobility limitations, may not be able to overcome barriers associated with
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Getting to the bus stop and/or finding a sheltered place to wait for the bus. Even in the absence of such limitations, features of the natural and built environment (e.g., hills, broken sidewalks, and streets without connections) can pose problems in accessing transit stops. In addition, some destinations are not well served by public transportation, especially in suburban areas, thus restricting opportunities to use public transit.

Other Challenges

There are other challenges that travel training programs may face. Staff turnover may make it difficult to maintain stability in programming, or to preserve established relationships in the community. Concerns about liability issues such as not meeting customers in their homes but rather in a public location instead may limit the depth of information about potential trainees gleaned during an in-home interview. The trainer should inform trainees of the nature and purpose of training, risks involved, the timeframe and extent of instruction, and the trainee’s right to refuse or withdraw consent. The trainee may be required to sign an informed consent. Trainees may also be asked to commit to the training process. A multi-purpose form that serves as a training consent, release of liability, and release of information authorization might be beneficial. A proactive risk management approach is often an effective way to deal with liability concerns. One way to mitigate risk and liability is to provide high quality service.

Trends in Public Transportation Funding

Public transit agencies are currently faced with rising costs, difficulties with acquiring and maintaining funding, and increasing demand for expensive paratransit services required by the ADA. Among many other provisions, the ADA requires that paratransit programs ensure that ADA eligible residents who cannot get to a bus stop or cannot use the fixed route transit system due to their disability still have some transportation to get to and from their daily tasks. Many public transit agencies are finding it difficult to provide ADA paratransit services in a cost-effective manner to meet the current level of demand; with the projected growth of the older population, meeting paratransit demands may be an even greater challenge in the future.

As public transit agencies search for ways to provide transportation to all customers, travel training has the potential to save agency costs by encouraging seniors who experience challenges to independent travel to use fixed route transit or transportation options other than ADA paratransit services for at least some of their travel needs. In recent years, costs to public transit agencies for providing ADA complementary paratransit services have risen faster than the costs of providing fixed route transportation, especially for some smaller transit agencies.

Also, transit agencies are currently concerned about the future stability of funding sources that have traditionally supported public transportation. In July of 2012, Congress passed legislation to authorize surface transportation funding for 2 years: titled “Moving Ahead for Progress for the 21st
Century“ (MAP-21). One issue with the MAP-21 legislation is that it eliminated two of the Federal Transit Administration’s programs that have been instrumental in funding travel training programs: the Section 5317 New Freedom program and the Section 5316 Job Access and Reverse Commute (JARC) program. The Section 5317 New Freedom program is now included into an expanded Section 5310 program, which is now called Formula Grants for the Enhanced Mobility of Seniors and Individuals with Disabilities. The Section 5317 program has been a common source of funding for travel training programs. The Section 5316 Job Access and Reverse Commute program is now included in the Section 5307 Formula Grant program as an eligible expense with no assurance that any funding will be used for JARC projects.

At the state and local levels, sales tax and property tax revenues used by transit providers to leverage other funding sources have been adversely affected by recent economic conditions. All of these factors create substantial pressures on public transportation providers to operate in the most cost-effective manner, and travel training has become one of the tools used to control costs and enhance ridership.

How Changes Can Occur

The fundamental premise of travel training is that education and training can change people’s behavior and improve their lives by providing information and skills to increase travel options for older adults, those with disabilities and the general public. Along the way, this process can support and help change the transportation services that serve the needs of these populations.

Figure 2 illustrates the theory of how changes occur for individuals and transportation providers as a result of travel training. Through outreach to their partners and potential consumers, travel training programs find candidates for training. Training events can include presentations and orientations about transit and other travel options, group training sessions, or one-on-one training. Figure 2 shows the sequences of the next events for consumers and transportation providers, respectively.

An immediate result of travel training is that consumers have a much better idea of what travel options might constructively address their travel needs. This knowledge combined with skill-based and situational training should lead to changes in their travel behavior (trip modes, trip frequency, destinations, etc.), which in turn result in improved travel options, more immediate services, lower per trip costs, and other improved travel attributes. The improved travel options will ultimately lead to improved quality of life, meaning greater mobility, more aging in place, and greater life satisfaction.

Figure 2 also shows the anticipated changes that travel training can generate for transportation providers. An immediate result of travel training efforts is often a better understanding of the travel needs of transit dependent people. This may result in changes in services offered; a typical
result is a greater focus on fixed route services by those able to navigate the schedules and routes. Note the connections diagrammed between changes in the travel behavior of consumers and the changes in services offered by transportation providers. These changes reinforce each other and can lead to further mutually beneficial outcomes including changes in travel behavior for consumers that can result in improved financial conditions for transit providers (e.g., more fixed route revenue, fewer or less rapidly growing ADA paratransit expenses); changes in services offered by transit providers can in turn lead to improved travel options for riders. The improved financial conditions for transit providers can eventually lead to an improvement in the number, frequency, and quality of transportation services that they offer or, alternatively, may be able to help offset cutbacks in public financial support for transit services.
Introduction

Figure 2 – Travel Training Theory of Change

Travel Training

Outreach to Partners and Consumers

Better Understanding of Transit Services

Improved Travel Options

Improved Quality of Life

Improved Financial Conditions for Transit

Transportation Providers

Better Understanding of Travel Needs

Improved Transit Services and Options

Improved Transit Services and Options

Improved Travel Behavior

Consumers

Changes in Services Offered

Changes in Travel Behavior
There are key outcomes for consumers and for transportation providers. For consumers, better understanding of transit services and enhanced travel skills lead to results such as greater use of fixed route transit, less use of ADA paratransit, greater use of other travel modes, and reduced travel time and costs. For transportation providers, travel training can lead to better understanding of the travel needs of older adults which in turn should lead to improved travel training programs and can eventually lead to transportation system improvements.

For transportation providers, changed travel behavior of older adults can result in increased income and cost savings, and these changes can lead to increased financial stability and the possibility of improved transportation services. Implementation of travel training may be influenced by factors outside the control of travel training programs, including the quality and extent of local transportation services, weather and terrain, and local community support for public transportation. Some individuals are more likely to benefit from travel training than others. Travel training has great potential to offer significant benefits to older adults, transportation providers, the caregivers of older adults, and local communities.
Each community is unique, with its own profile of mobility needs and preferences, past history of efforts to promote such mobility, political climate, institutional arrangements, resource constraints, public transit coverage and availability, and other important features. Thus, travel training programs must be responsive to the characteristics of the communities in which they are established. At the same time, there are common themes and principles that underlie effective travel training programs, and each community will need to shape these principles in light of its own needs and resources as it undertakes efforts to build and sustain successful travel training.

Focus and Orientation

The philosophy, vision, and mission of travel training programs should be designed to serve transportation dependent individuals, with savings in public transportation costs being a result, but not the primary objective of the training program. A central program element should be a social services model of service delivery, meaning a central focus on meeting the needs of riders and the skills they require to remain active, mobile, independent, and able to age in place if that is their desire. It must be remembered that the typical result of transit agencies saving money on paratransit services through investments in travel training is a strong motivator for such investments. Additional farebox revenues will accrue to public transit systems from those who never previously used paratransit service but now ride fixed route service. In the competitive environment for scarce public dollars, travel training programs often need to demonstrate both cost savings and revenue increases to maintain viable funding streams.

Design, Development, and Operations

Program design and development deserve careful consideration as they are the basis for many program decisions. Design and development should be responsive to stakeholder needs (both users and providers) and reflect community transportation resources. In addition, and to the extent possible, programs should offer individual assessments, as well as both group and one-on-one training. Individual assessments of program participants’ needs and capabilities serve as a useful prescreening tool to help customize the actual training.

One-on-one training provides individualized instruction on how to travel safely and independently, including hands-on experience riding public transit. Group training provides an opportunity to orient a larger audience to the basics of public transit including how to plan and take trips. Group training can be successfully targeted to high-volume residential/work locations.

By striving for this type of multifaceted and comprehensive program orientation, travel training can be better tailored to the individual needs and capabilities of the target audience(s) for the program. The initial step in meeting individual needs is to explore available transportation options with new customers based on that customer’s specific needs, ability level, and proximity to transit, as well as his or her wishes and transportation goals. An appointment with the
customer in his or her own home for an initial interview is a very important means of starting a training program because of the insights it typically offers.

In terms of program operations, sustainable funding is a key. Travel training information can be integrated into agency marketing and branding efforts. The training program can be marketed through educational outreach. Written forms and procedures need to be developed as a basis for program reporting and evaluation.

**Instruction, Content, and Staff**

Program instruction and content will vary depending on the scope of the program, resources available, needs of the target audience, particular strengths of the program staff, and so forth. Having clearly written training materials is quite important as is providing opportunities for “hands-on” experience like riding actual transit routes. Support for the travel trainers must include quality training, ongoing support, and an evaluation process of their activities.

The travel trainers are even more important. It is clear from observing successful travel training programs that competent staff members who excel in customer service are key to program success. Many times a social services or human services background can prove very valuable. Despite what some people might expect, the personal qualities of trainers are often more important than job experience or background. The travel trainers must enjoy working with people and they must be confident in what they do. Trainers must be able to connect with trainees by being sensitive to feelings: if people are losing some of their independence, it’s important that they can still keep their dignity. Personal traits of trainers such as empathy, likability, respect, patience, adaptability, and kindness are central to this ability.

Trainer credibility can also be enhanced when the trainer regularly uses public transportation. Critical thinking is important to trainer effectiveness and having established relationships with key personnel and agencies in the transportation community is a bonus. Finally, trainers must be flexible, resilient, and calm, as they often encounter unexpected changes in the real-world training environment.

**Partnerships**

Successful travel training programs rely on partnerships to support their travel training activities. If the travel training program is offered by the local public transit operator, partnerships with human services agencies are vital. If an organization other than the transit agency provides travel training, the transit agency is a key partner: it can be a primary funding source and also a provider of referrals to people who either may not be eligible for ADA paratransit services or who transit agency staff think might benefit from using a mix of ADA paratransit for some needs (e.g., travel to doctor’s offices or medical facilities that are not near fixed routes) and fixed route transit for
others. Human and social services agencies that provide services to older adults or individuals with disabilities or special travel needs serve a key role by providing referrals and developing travel training programs to assist their constituencies. Senior centers and senior housing complexes are key partners, particularly for group travel training, especially those that are subsidized by the U.S. Department of Housing and Urban Development. Hospitals can be key partners at some sites.

The person leading the travel training program plays a central role in building and sustaining relationships with key organizational stakeholders in the community, as well as working directly with program participants. Thus, a dynamic leader with strong interpersonal skills, a passion for this kind of work, and expertise in important areas related to the populations served can make an important contribution to the success of the program.

Outreach and Promotion

Successful travel training programs make it clear that promotion and outreach are needed to identify and raise the interest of target audiences. Referrals from transit agencies, senior centers, senior housing projects, and other human and social services agencies are often the result of regular and repeated outreach efforts to familiarize agencies with travel training in general and the services of the case study programs in particular. The focus of many programs in marketing travel training for is to promote the lower cost and relative flexibility of fixed route programs as an alternative to ADA paratransit, allowing riders the flexibility to travel without having to reserve ADA paratransit service ahead of time.

Marketing can also increase knowledge of the travel options available. Many travel training programs publish books or brochures with “success stories” about clients who successfully participated in travel training and, as a result, were able to experience a richer, fuller life. Word-of-mouth referrals from prior trainees can be a highly effective marketing tool. Many existing travel training programs offer training to staff and volunteers in partnering agencies to make them aware of fixed route transit options and the potential benefits of travel training for their clients. Sometimes these programs are called “train the trainer” programs because staff in the human, social services, and transit agencies may provide support to senior adults both before and after they receive travel training. The reality is that programs that provide orientation to the benefits of fixed route service and travel training provide a resource for promoting programs to individuals who are in a position to positively influence the travel training target populations.

Monitoring and Analysis

Demonstrating program results is critical to the success of any publicly funded program. People and agencies who fund programs, who manage and operate programs, and who benefit from services have an interest in knowing if a program is successful, why it is successful, and how it
could be further improved. Performance measurement is a tool typically involved in improving transportation services and other programs by documenting progress toward pre-established goals, such as increasing the number of older adults using fixed route transit services. It’s important for travel training programs to keep track of the resources they apply to their program, what they produced with those resources, and what happened as a result, and impacts, which are the direct or indirect results or consequences from achieving program goals.

New technologies can greatly assist in recording and reporting tasks. What this means for travel training programs is that they need to keep track of their expenses and other resources invested in the program, record the numbers of persons trained, and monitor how their training has affected their trainees in the short term and in the long run. This information will help the programs improve operations to better meet goals, make the programs more cost effective over time, and demonstrate their successes to funders and other key community stakeholders.

**Components of Successful Travel Training Programs**

It appears that, to be successful, a travel training program must include competencies in a full range of travel training services, including outreach, training of trainers, training of individuals, and other programs to meet constituents’ needs. Successful travel training programs often focus on the following principles and attributes, while taking advantage of unique factors in their communities:

- Developing an overall program philosophy.
- Creating standards for training and supporting travel trainers.
- Tailoring travel training to individual needs.
- Tailoring travel training to the local community.
- Hiring travel trainers with the right personal qualities.
- Providing strong organizational and management leadership and support.
- Building and maintaining flexible, collaborative relationships.
- Involving and recognizing volunteers.
- Evaluating travel training outcomes and widely disseminating success stories.
- Realizing the benefits of technology.
- Identifying and retaining funding sources.

**Promoting Appropriate Travel Skills**

There are numerous skills that an individual needs to successfully travel using public transportation. The following lists include some necessary individual characteristics; if an individual does not have these skills before travel training begins, he/she should certainly have them by the end of training. A successful trainee should be able to demonstrate competence in at least these areas at the end of the training process:
A successful travel training program should teach the participant how to plan a trip and use public transportation.

- Identify transportation options.
- Understand route maps, stops, schedules, and landmarks.
- Get to and from bus stops safely.
- Buy and use fare media.
- Get on and off the bus safely.
- Pay fares and purchase passes.
- Ride a specific route.
- If necessary, ask for help from the driver or other passengers.
- Transfer to other buses, if needed.
Effective travel training programs for older adults can be complex to design and deliver, but they should be simple and understandable to older travel trainees. To be effective, programs should contain the following elements:

**Philosophy, Vision, and Mission Focused on Customer Service First**

Travel training programs should be designed to serve riders, with savings in public transportation costs being a result, but not the primary objective of the training program. A central element should be a social services model of service delivery, meaning a central focus on meeting the needs of riders and the skills they require to remain active, mobile, and independent. Transportation cost savings will result, but should not be the primary goal of a travel training program. Developing a vision for the program and determine how the mission will fulfill the vision is critical for a successful and effective program.

**Focus on Individual Abilities and Learning Patterns**

Effective travel training has a strong individual focus, meaning that training programs should be closely tailored to the needs and abilities of those people being trained. There are 10 keys to effective travel training:

1. Always keep safety as the foremost concern.
2. Be sensitive to learning needs, styles, and patterns.
3. Involve the consumer in his or her own travel training program.
4. Structure the lesson sequence so that each succeeding task is built on previous successes.
5. Keep the training steps short and simple.
6. Check to see that the trainee has understood the explanations.
7. Use the natural helping network to reinforce skill attainment and provide encouragement.
8. Foster independence, but remain an advocate.
10. Make the learning process fun.

**Professional, Well-Trained Staff**

The travel training program should be staffed with professionals who understand a social services model of program delivery and the travel needs of older adults, those with disabilities and the general public. They should have the ability to evaluate travel training candidates and be able to recommend appropriate training, whether that training is for fixed route or paratransit service. The travel training program should provide regular learning updates and evaluations.
Well-Developed Travel Training Curricula

Travel training curricula should be developed and organized to serve the diversity of travel training needs. Curricula need to encompass individual, group, and follow-up or refresher training. While group training may be sufficient for some people, some people will require individualized training, tailored to their capabilities, experience, environment, and the trip destinations they need to reach. Some travel trainees may require periodic retraining. Such training is essential for older adults to continue to benefit from the use of fixed route or paratransit service, as services or senior capabilities may change.

Strong Program Partners, Including Public Transit Systems

The first program partner should be the organization that sponsors the travel training program. Program partners are essential to success. Partners include public transit systems if the travel training program is set up outside the public transit system. Whether inside or outside a public transit system, program partners should include human services agencies that provide services, organizations that advocate, and places where people gather.

Community Outreach and Education

Broad community support matters, from local governments that serve and care about their community to the general citizenry who take pride in their community. Outreach and education begins with program partners, so they fully understand the program, how it operates, and how older adults and the community may benefit. Outreach is important to other community organizations that may help people become aware of the travel training opportunities. Outreach also builds support within the business community.

Planning for and Tracking Expenses

The most effective programs do the following:

- Plan for the coming year’s expenses.
- Record all expenses related to travel training.
- Record the immediate results of their training efforts:
  - Numbers of training sessions held and persons trained
  - Results should be tracked separately by mode of training (orientation, group training, and one-on-one training).
- Record and report the long-term results of travel training efforts, such as changes (if any) for riders:
  - Numbers of trips taken.
  - Patterns of use of fixed route transit and ADA paratransit services.
Effective Programs

- Travel costs.
- Satisfaction with travel services.
- Social connectedness.

➤ Record and report the long-term results of their training efforts, such as changes (if any) for each travel mode for transportation providers:
  - Overall numbers of trips taken.
  - Overall costs.
  - Rates of growth in expenses.

Outcome Measures for Individuals and the Program as a Whole

Outcome measures should focus on measuring individual results and overall program results. Measuring results is important for a number of reasons, including documenting the benefits that trainees achieve. Benefits can be measured in a number of ways. Surveys of travel trainees can measure benefits of training immediately upon completion of training and at 3-, 6-, 9-, and 12-month intervals. Equally important are program results, including benefits reported by trainees. In addition, program results should report the costs of providing travel training services and the resulting transportation costs that are saved as a result of increased use of fixed route transit services. Measuring individual results shows the direct benefits to trainees. Measuring program results shows aggregate benefits to trainees and measures the effectiveness of the program overall, including cost savings for public transportation and other providers. Demonstrated cost savings are likely to be critical to obtaining sustained funding for the travel training program, and documentation of savings will help to obtain this funding.

Stable and Sustainable Funding

Sustainable funding is critical to support a successful travel training program, which will incur expenses for staffing, supporting materials, equipment and services, facilities, and general operating support. A strong travel training program will achieve savings in paratransit service costs by shifting paratransit rides to fixed route services. Additional farebox revenues can accrue to public transit systems from riders who never used transit before but now ride fixed route service. With such results, sustainable travel training programs generate financial benefits that exceed the costs of travel training.
Training Referral

Name (person being referred): __________________________________________________________

Phone: __________________________ Email: _____________________________________________

Address: ___________________________________________________________________________

Preferred contact method: ________________________ Best day/time to contact: _____________

Primary language: ________________________ Date of birth: _______________________________

Destination(s): _______________________________________________________________________

Special supports, considerations, or concerns: _____________________________________________

_____________________________________________________________________________________

Mobility Aides: _______________________________________________________________________

Current method of transportation: ___________________________________________________________________________

Emergency Contact One

Name: __________________________________________ Relationship: _________________________

Agency (if applicable): _________________________________________________________________

Address: ___________________________________________________________________________

Primary Phone: __________________________ Alternate Phone: _____________________________

Referred by (name/contact): ____________________________________________________________

Above information will be filed, and remain confidential. All information gathered is used for travel training purposes. A log of training and hours will also be kept on file, if training occurs. The training waiver must be signed prior to training. Please contact Travel Trainer (XXX) XXX-XXX-XXX with any questions.

Insert Trainee Picture Here
Initial Assessment

Trainee: __________________________________________   Date: ____________________________

Person Conducting the Assessment: _____________________________________________________

Referral received from: ___________________________ (Please attach Referral form)

Background

1. Do you want to use the bus or train?             Yes                        No
   ➢ If yes, why? _________________________________________________________________
   ➢ If no, why not? _____________________________________________________________

2. Have you ever ridden the bus before?             Yes                        No
   ➢ Describe (with whom?, where?, how often?, what happened?) __________________
     ________________________________________________________________
     ________________________________________________________________

3. Do you travel around your own neighborhood by yourself?             Yes                        No
   ➢ If so, where? ____________________________________________________________

4. How are you currently getting to your destination? _____________________________
   __________________________________________________________________________
   __________________________________________________________________________

5. How much do you spend weekly in transportation costs? _________________________

6. Do you have a paratransit ID?             Yes                        No

7. Do you have a transit half fare card?

8. Do you have a school identification card?

Daily Activities

1. How do you spend a typical day? _____________________________

2. In your free time, what do you like to do? ____________________________
Transit Use

What are your reasons for not using public transit before (on a regular basis)?

Concerns

Getting lost  Falling  Forgetting route  Being robbed/mugged
Crowds  Vehicle itself  Failure/Didn't feel capable  Using lift
Not being able to communicate  Being stigmatized because of disability
Having a seizure  Being Stranded  Driver unhelpful  Other______________

Other People

No one suggested it  Parent/Guardian objection
No one felt I was capable  Other _______________________________

General Reasons

Other transportation provided  Was able to drive  No money
Inconvenience of public transit  Not near a stop or route  No training available
Bad work hours  Other: _____________________________________

Cognitive Recognition

At this point assessor takes out transit schedules and reviews with trainee the transit routes, fare and times to get to desired destination. During this discussion the assessor is evaluating the trainees’ ability to do the following: read and recognize numbers, letters, words, and phrases; tell time; distinguish colors; use money; follow directions and remember things. Observations should be recorded here. Is the trainee able to recognize letters and numbers, tell time, use money?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Initial Assessment

Physical / Medical

1. Do you have any difficulty moving around, going long distances, balancing and/or taking steps? ____________________________

2. Do you use anything to help you ambulate? ____________________________

3. Do you have vision or hearing difficulties? ____________________________

4. If so, do you use any corrective devices? ____________________________

5. What medications are you currently taking? ____________________________

6. Must you take them at specific times? ____________________________

7. Do you have any side effects from your medication(s)? If so, what are they? ____________________________

8. Are there any special foods you should or should not eat? At any particular times? ______

9. Do you have active seizures? If so, what type are they and how often do they occur? ______

Coping Skills

1. What makes you upset and how do you work it out? ____________________________

2. If you are having trouble communicating, how do you deal with it? ____________________________
3. What would you do in an emergency situation? (Give an example i.e., If you miss a bus)
______________________________________________________________________________
______________________________________________________________________________

Questions / Concerns
1. Do you have any questions or concerns about travel training? ________________________
______________________________________________________________________________

2. Do you have any questions or concerns about using public transportation? _____________
______________________________________________________________________________

Logistics
1. Time available for training: ________________________________

2. Work hours (if appropriate): ________________________________

3. Preferred starting date: ________________________________

4. Specific time table needed (if any): ________________________________

Trainer Recommendations
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______________ Travel Trainer Initials
Pre & Post Training

Trainee: _________________________________   Travel Trainer: _____________________________

Pre-Test Date: ____________________________  Post-Test Date: _____________________________

3 = Without assistance; completes skills properly
2 = Reassurance; knows but looks for approval from trainer
1 = Verbal prompts or gesture initiative; needs to be told or led in skills
0 = Physical prompts/no response; no indication of what is going on; needs extensive training

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leaves the place or origin and arrives at the transit stop on time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates proper street crossing techniques</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stands at the transit stop or terminal in an appropriate place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carries an appropriate identification card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Takes out the correct fare or purchases ticket</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifies the correct vehicle through number, color, style and/or inquiry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travels to and from the transit stop using the route of choice that is safe and most convenient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signals the operator the desire to board</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boards the transit vehicle through the front entrance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shows the operator the pass, ticket or transfer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Places the correct fare in the proper place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asks the driver for a transfer, if needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects a proper place to sit or stand on the transit vehicle</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows and recognizes landmarks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sits or stands properly and safely until at the disembarking stop</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Displays proper behavior while on the transit vehicle</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows and follows the rules on the transit vehicle</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remains alert throughout the trip</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signals for a stop at the proper time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exits the transit vehicle through the proper door</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travels to and from transfer points or destinations through the most direct and safe route</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calls or asks for assistance when using a phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behaves appropriately with strangers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifies / states emergency contact numbers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifies community workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows what to do if lost or sick</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows what to do if identified transit vehicle is missed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reads the transit vehicle's schedules and/or finds routes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Trainee Evaluation: Observation of how the trainee felt and acted, etc.

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

2. Task Evaluation: What was accomplished? What skills were learned?

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

3. Assessment: Evaluation of how training techniques worked.

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

4. Planning: What will happen in the next session? What are the goals?

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

5. Trainee Feedback:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

6. General Comments:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
Skills Progression

Trainee: _________________________________   Travel Trainer: _____________________________

Date Training Began: ___________________  Date Training Completed: ______________________

<table>
<thead>
<tr>
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<td>Identifies the correct vehicle through number, color, style and/ or inquiry</td>
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<td>Signals the operator the desire to board</td>
</tr>
<tr>
<td>Boards the transit vehicle through the front entrance</td>
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<td>Places the correct fare in the proper place</td>
<td>Asks the driver for a transfer, if needed</td>
</tr>
<tr>
<td>Places the correct fare in the proper place</td>
<td>Asks the driver for a transfer, if needed</td>
<td>Selects a proper place to sit or stand on the transit vehicle</td>
<td>Knows and recognizes landmarks</td>
</tr>
<tr>
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<td>Displays proper behavior while on the transit vehicle</td>
<td>Remains alert throughout the trip</td>
<td>Signals for a stop at the proper time</td>
</tr>
<tr>
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<td>Travels to and from transfer points or destinations through the most direct and safe route</td>
<td>Calls or asks for assistance when using a phone</td>
</tr>
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<td>Behaves appropriately with strangers</td>
<td>Identifies / states emergency contact numbers</td>
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</tr>
<tr>
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<td>Identifies community workers</td>
<td>Knows what to do if lost or sick</td>
<td>Knows what to do if identified transit vehicle is missed</td>
</tr>
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<td>Knows what to do if lost or sick</td>
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<td>Reads the transit vehicle’s schedules and/or finds routes</td>
</tr>
<tr>
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<td>Knows what to do if identified transit vehicle is missed</td>
<td></td>
</tr>
</tbody>
</table>
Appendix D

Mobility 2040 – Long Range Transportation Plan

HUMAN SERVICES NEEDS AND DIRECTION TECHNICAL MEMORANDUM
Coordinating access to health and human services for populations with limited mobility is a key component of ensuring that the transit system meets the needs of all users. Residents outside of the fixed-route public transit service area rely on Councils on Aging (COAs), Associations of Retarded Citizens (ARCs), Veterans Administrations, and other organizations which provide transportation to meet the health and human services needs of users. This technical memorandum presents the Coordinated Human Services Transportation Plan (CHSTP) developed by NLCOG in 2007, a summary of demand-responsive transit user and provider surveys, an analysis of transit demand, and recommendations for successful coordination.

Coordinated Human Services Transportation Plan (CHSTP)

With the passage of SAFETEA-LU in 2005, service providers that received federal transit funding through Section 5310 (for individuals with disabilities and the elderly), Job Access and Reverse Commute (JARC), or New Freedom grants must derive their projects or programs from a “locally developed, coordinated public transit-human services transportation plan developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public.”¹ The Coordinated Human Services Transportation Plan (CHSTP) identifies needs of area residents with disabilities, older adults, and people with low incomes, and prioritizes strategies for meeting those needs.

NLCOG, acting as the Council of Governments for the ten-parish region that includes Bienville, Bossier, Caddo, Claiborne, De Soto, Lincoln, Natchitoches, Red River, Sabine, and Webster Parishes, guided the completion of a CHSTP process in 2007. The process resulted in an abbreviated plan, as resources were limited to complete a more extensive CHSTP due to the demands on regional service providers presented by Hurricanes Katrina and Rita. The plan presents broad, parish-level data on concentrations of populations to be served by human services/transportation providers, and identifies whether certain FTA-funded providers currently operate in each parish. At the time of the plan’s publication, neither Caddo nor Bossier parish had a service provider funded by Section 5311 (intended for rural transit providers). The plan also relied on a November 2006 statewide survey of providers administered by DOTD. That survey indicated that a majority of service providers in all of Northwest

Louisiana (including Bossier and Caddo Parishes) believed that additional transit services will be needed in the region within the next five years.

The plan identifies several challenges to regional coordination amongst service providers. Many providers expressed concern over a lack of incentives for agencies to meet unmet transportation needs given their limited budgets and the fact that transportation is usually an ancillary service outside of their core mission or goal. There was also concern that it would be difficult to obtain large enough numbers to realize additional benefits in rural areas given the low density of service demand. Furthermore, some providers perceived a loss of ability to control when and where stakeholder transportation assets would be used.

The plan considered several strategies to address these concerns, resulting in an action plan consisting of five goals, as shown in Table 1.
<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase capacity to serve unmet needs</td>
<td>Improve our ability to determine need for transportation services</td>
<td>Conduct needs assessment through existing service agencies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Solicit public input</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Determine what data is currently being collected</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop a plan for collecting data needed for all funding streams in a standard format</td>
</tr>
<tr>
<td>Ensure that coordination process is comprehensive and sustainable</td>
<td>Develop communication between providers</td>
<td>Meet at least every three months to discuss coordination possibilities and share information</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop shared definition of terms</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Build dialogue skills</td>
</tr>
<tr>
<td>Create a more cost effective service delivery system</td>
<td>Develop a method for prioritizing coordination activities</td>
<td>Collaboratively develop a set of proposed prioritization criteria</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Solicit input from public on criteria</td>
</tr>
<tr>
<td>Make services more easily understood and accessible by riders</td>
<td>Increase service availability</td>
<td>Determine where duplication of services exist</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop coordination options to reduce duplication of services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Determine what marketing strategies are currently being used</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identify areas of duplication and options for coordination</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop coordinated marketing strategy</td>
</tr>
<tr>
<td>Improve quality of service provided</td>
<td>Increase public participation in evaluating service</td>
<td>Survey riders on existing systems about quality of service and areas needing improvement</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hold public meeting on coordinated plan</td>
</tr>
</tbody>
</table>

Because this was the first CHSTP attempted by providers in the region, the 2007 plan provides a framework for future planning activities but does not provide very detailed information on the state of the transit system outside of Shreveport and Bossier City. Particularly lacking from the 2007 plan is a technical or geospatial data analysis of service provision within Bossier and Caddo Parishes.
Coordinated Human Services – User Survey Results

Between February 2013 and April 2014, NLCOG administered a survey to users of the various human services/transportation providers in the region to better understand service needs. The survey included responses from the entire 10-parish region for which NLCOG is responsible as the Council of Governments, but because the survey included zip code information, it was possible to extract only the responses where the user either lived, worked, or had a doctor located within Bossier or Caddo Parish. The survey revealed some of the following information about the users of these demand-responsive transit services:

- 34 percent of survey respondents use transportation service providers to get to work in Bossier or Caddo Parishes;
- 67 percent of respondents use transit to get to doctor or medical appointments;
- The largest percentages of respondents were female (56 percent), low-income (making less than $10,000/year – 42.5 percent), and elderly (over age 65 – 35 percent);
- Most respondents reported having no children in the household, but of households reporting any children, one-child households were most common; and
- Only 38 percent of respondents reported receiving some form of disability payments; only 28 percent reported receiving social security benefits.

The survey also presented a series of questions about the quality of service as perceived by users by asking users to agree or disagree with several service-oriented statements, as well as ranking possible areas of improvement. Overall, respondents felt that service quality was adequate, although there was some concern that the service limited the options for where users could work. While most respondents agreed that service met their current needs, they also agreed that they would use public transportation more if every one of the service quality improvements suggested were implemented – particularly if reliability were improved. Table 2 shows the percentages of agreement or disagreement for each service quality statement.
## Table 2: CHS Rider Survey - Service Quality Impressions

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Neutral</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The transportation I use:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does a good job of getting me where I need to go</td>
<td>58%</td>
<td>27%</td>
<td>4%</td>
<td>3%</td>
<td>2%</td>
<td>6%</td>
</tr>
<tr>
<td>Makes it easy to do errands</td>
<td>42%</td>
<td>18%</td>
<td>14%</td>
<td>7%</td>
<td>4%</td>
<td>14%</td>
</tr>
<tr>
<td>Limits where I can work</td>
<td>23%</td>
<td>12%</td>
<td>9%</td>
<td>5%</td>
<td>5%</td>
<td>46%</td>
</tr>
<tr>
<td>Is expensive or difficult to pay for</td>
<td>19%</td>
<td>14%</td>
<td>20%</td>
<td>8%</td>
<td>22%</td>
<td>17%</td>
</tr>
<tr>
<td>Makes me wish there was something better</td>
<td>33%</td>
<td>15%</td>
<td>14%</td>
<td>5%</td>
<td>15%</td>
<td>17%</td>
</tr>
<tr>
<td>I would use public transportation regularly if:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I knew what was available</td>
<td>34%</td>
<td>19%</td>
<td>15%</td>
<td>3%</td>
<td>8%</td>
<td>21%</td>
</tr>
<tr>
<td>There were bus routes close to where I lived</td>
<td>31%</td>
<td>13%</td>
<td>10%</td>
<td>5%</td>
<td>13%</td>
<td>28%</td>
</tr>
<tr>
<td>It allowed me to make stops for other tasks</td>
<td>34%</td>
<td>18%</td>
<td>14%</td>
<td>6%</td>
<td>7%</td>
<td>21%</td>
</tr>
<tr>
<td>Wait time for pick-up was shorter</td>
<td>37%</td>
<td>19%</td>
<td>14%</td>
<td>5%</td>
<td>7%</td>
<td>18%</td>
</tr>
<tr>
<td>Arrival time was more reliable</td>
<td>40%</td>
<td>18%</td>
<td>16%</td>
<td>3%</td>
<td>5%</td>
<td>18%</td>
</tr>
<tr>
<td>I felt safe and secure</td>
<td>38%</td>
<td>18%</td>
<td>12%</td>
<td>7%</td>
<td>5%</td>
<td>20%</td>
</tr>
<tr>
<td>Buses and stops were more disability friendly</td>
<td>35%</td>
<td>14%</td>
<td>21%</td>
<td>4%</td>
<td>6%</td>
<td>20%</td>
</tr>
<tr>
<td>It was easier for me to make an appointment</td>
<td>36%</td>
<td>20%</td>
<td>12%</td>
<td>5%</td>
<td>7%</td>
<td>18%</td>
</tr>
<tr>
<td>Language was not a problem</td>
<td>31%</td>
<td>9%</td>
<td>13%</td>
<td>5%</td>
<td>7%</td>
<td>34%</td>
</tr>
<tr>
<td>Public transportation makes it easy for me to:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Get to medical appointments</td>
<td>46%</td>
<td>14%</td>
<td>8%</td>
<td>4%</td>
<td>7%</td>
<td>21%</td>
</tr>
<tr>
<td>Get to work</td>
<td>28%</td>
<td>11%</td>
<td>9%</td>
<td>2%</td>
<td>4%</td>
<td>46%</td>
</tr>
<tr>
<td>Get to shopping, social events, entertainment, etc</td>
<td>32%</td>
<td>15%</td>
<td>14%</td>
<td>7%</td>
<td>7%</td>
<td>26%</td>
</tr>
<tr>
<td>Get to shopping/errands</td>
<td>25%</td>
<td>25%</td>
<td>25%</td>
<td>0%</td>
<td>25%</td>
<td>0%</td>
</tr>
<tr>
<td>Get to social events</td>
<td>20%</td>
<td>20%</td>
<td>40%</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>Get to service provider appointments</td>
<td>28%</td>
<td>22%</td>
<td>13%</td>
<td>5%</td>
<td>6%</td>
<td>26%</td>
</tr>
<tr>
<td>Visit family and friends</td>
<td>29%</td>
<td>12%</td>
<td>14%</td>
<td>5%</td>
<td>7%</td>
<td>33%</td>
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</table>
Coordinated Human Services - Provider Survey Results

Table 3 shows the CHS providers in Caddo and Bossier parishes by service type.

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<thead>
<tr>
<th>Human Service/Transportation Provider</th>
<th>Primarily Transportation?</th>
<th>Type of Service</th>
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</thead>
<tbody>
<tr>
<td>Bossier Council on Aging</td>
<td>No</td>
<td>On-demand transportation for elderly, people with disabilities, and rural residents</td>
</tr>
<tr>
<td>Caddo Council on Aging</td>
<td>No</td>
<td>No transportation directly provided</td>
</tr>
<tr>
<td>ARC of Caddo-Bossier</td>
<td>No</td>
<td>On-demand transportation for people with disabilities and residents of ARC facilities</td>
</tr>
<tr>
<td>SporTran – LiftLine</td>
<td>Yes</td>
<td>On-demand transportation for elderly and people with disabilities – ONLY available within Shreveport and Bossier City</td>
</tr>
<tr>
<td>Socialization Services</td>
<td>No</td>
<td>On-demand transportation for elderly and people with disabilities</td>
</tr>
<tr>
<td>MJ Transport</td>
<td>Yes</td>
<td>Medical transportation only (Shreveport)</td>
</tr>
<tr>
<td>Medical Transportation</td>
<td>Yes</td>
<td>Medical and non-medical transportation (Shreveport)</td>
</tr>
<tr>
<td>Quality Transportation</td>
<td>Yes</td>
<td>Non-medical transportation (Caddo Parish)</td>
</tr>
<tr>
<td>AMPM</td>
<td>Yes</td>
<td>Medical transportation only (Caddo Parish)</td>
</tr>
<tr>
<td>Veterans Administration</td>
<td>No</td>
<td>Medical transportation for veterans to VA hospital (Caddo and Bossier parishes)</td>
</tr>
<tr>
<td>Goodwill Industries of NW Louisiana</td>
<td>No</td>
<td>Contracts with SporTran to provide discounted day and monthly transit passes for low-income job seekers</td>
</tr>
</tbody>
</table>

NLCOG also distributed a survey to the service providers in Northwest Louisiana about some of the challenges these organizations face in providing transportation to rural and transit-dependent populations within the area. The only response received from Bossier or Caddo Parish was from the ARC of Caddo-Bossier, which primarily provides employment, dayhab, and some education services to individuals with mental and/or physical disabilities in Bossier and Caddo parishes. ARC also provides transportation services to and from work, medical appointments, and dayhab centers, as well as for day trips.

The survey indicated that ARC operates two converted 15-passenger vans that are wheelchair accessible, as well as two non-accessible vans that hold 13 passengers. The demand-responsive service is available to eligible clients from 7AM to 4:30PM Monday through Friday, providing “curb-to-curb” transportation as long as reservations are made 24 hours or more in advance. ARC estimated that they had 87 regular clients that collectively made about 520 trips between June 2012 and April 2013, of which approximate 10 percent were trips requiring a wheelchair. The service is free, and the agency’s 2012 transportation revenue of $165,102 came entirely from Section 5310 (Persons with Disabilities and Elderly Individuals) grant funding from FTA.

The survey also explored some of the challenges respondents perceived to providing coordinated transportation services to populations in need (rural and/or transit dependent). The responses from ARC indicated that adequate funding and reconciling the priorities and agendas of various service providers to be the biggest obstacles to
mobility in the area. Furthermore, ARC sees customer needs being adequately met, but that they could be met more cost effectively, and that one possible role they could play in improving regional transportation services could be to provide information on the transportation needs of individuals with disabilities.

**Rural and Human Service Transit Demand**

In addition to reviewing the CHSTP and the results from both the user and provider surveys administered by NLCOG, a geospatial analysis was used to identify areas of service demand in rural parts of Bossier and Caddo Parishes and areas where human service providers are concentrated, to identify likely transportation destinations for populations depending on these demand-responsive transit services. Figures 1 through 3 show where respondents to the user survey live, work, or go to doctor appointments by zip code. Unsurprisingly, the highest number of responses came from zip codes in central Bossier and Caddo parishes in the Shreveport UZA. However, there were also a relatively high number of respondents living in the north-central portion of each parish. Employment and doctor locations were overwhelmingly concentrated in urban portions of the parishes, indicating that while populations served by service providers are spread throughout the region, the most likely destinations for these populations are concentrated in Shreveport and Bossier City.
Figure 1. CHS Riders by Home Zip Code
Figure 2. CHS Riders by Work Zip Code
Figure 3. CHS Riders by Doctor Zip Code
A geospatial analysis of higher concentrations of potential service destinations for rural and transit dependent populations was completed to further identify service gaps. The list of destinations was created using InfoUSA employment data that indicated the locations of businesses by North American Industrial Classification System (NAICS) codes, pulling out businesses that fell into several broad categories including: 621XXXX – Ambulatory Care centers (such as doctors’ offices, outpatient centers, kidney dialysis centers, etc.), 622XXXX – Hospitals, 623XXXX – Nursing and Other Care centers, and 624XXXX – Social Services. Figure 4 presents the results of this analysis. Service provider destinations are overwhelmingly concentrated in Central and Southeast Shreveport, with smaller concentrations located near the intersections of Benton Road and Interstate 220, Interstate 20 and the Inner Loop (3132), and Bert Kouns Industrial Loop and Mansfield Road.
Figure 4. Service Provider Destinations
RECOMMENDATIONS

The NLCOG is currently embarking on revising their Coordinated Human Services Transportation Plan. It is recommended that service providers within the region provide details on what HSTP work has been done since 2007 to implement some of the strategies recommended by the original plan, and identify what progress has been made towards achieving the goals outlined in the original action plan.

The geospatial analysis of human service and demand-responsive transportation providers in the NLCOG area presented in this report can also serve as a resource to inform an updated CHSTP process. Using known concentrations of both existing transportation service provider riders and likely destinations, better coordination between the service providers can be achieved to eliminate redundant duplication of services and improve cost efficiency. This will allow providers to reach farther into rural parts of both parishes and increase operating hours, enhancing mobility options for rural and transit dependent populations of the area. In light of the results of the user survey, particular attention should be paid to the connections between CHST users and medical facilities, given that the largest portion of transportation providers’ passengers use the service to reach a doctor or medical appointment.

NLCOG and CHSTP stakeholders should consider best practices for coordinated planning while updating the CHSTP. Improving coordination requires communication, trust, and continuous involvement from all parties. Including all relevant entities early in the planning process builds trust and will allow a more accurate understanding of resources available in the community. During this time, it is important to ensure that all parties are willing to adapt to a new way of providing service. Setting goals and objectives early allows the partners to build consensus on a topic before delving into details over how these goals should be met, which improves the trust and strength of the relationship. Once these goals have been developed and initial facts and conditions have been gathered, local officials should be recruited to support the coalition. These key individuals can be instrumental in securing funding, identifying user stakeholders, and gaining support from the public. Finally, focusing on short-term improvements to improve communication, record keeping, and data sharing may accelerate the timeline for long-term coordination goals.

Appendix E

Coordinated Public Transit Human Services Planning Committee
MAILING LIST FOR QUARTERLY MEETINGS
Gale Dean  
New Horizons Independent Liv Center  
1111 Hawn Ave Ste A  
Shreveport, LA 71107

Louisiana Tech University  
Office of Disability Services  
318 Wyly Tower  
Ruston, LA 71272

Gregg Scott  
People Centered Support  
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Ruston, LA 71270

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Caddo COA, Inc.  
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Shreveport, LA 71109

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DeSoto Habilitation Services, Inc.  
P O Drawer 1238  
Mansfield, LA 71052

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Louisiana Center for the Blind  
101 S. Trenton  
Ruston, LA 71270

Lincoln COA  
P O Box 1000  
Ruston, LA 71270

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SporTran  
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Shreveport, LA 71107

Juanita Allen  
Evergreen Life Services  
4400 Viking Drive  
Bossier City, LA 71111

Laura L. Redman  
Natchitoches ARC, Inc.  
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Natchitoches, LA 71457

Tamara Crane  
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Bossier City, LA 71111

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Shreveport, LA 71106

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Red River ARC  
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Coushatta, LA 71019

Mike Magee  
Bienville COA  
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Arcadia, LA 71001

Natchitoches OCS  
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Natchitoches, LA 71457

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Tim Caine  
Claiborne OCS  
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Homer, LA 71040

Majs. Paul and Linda White  
Salvation Army Social Services  
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Shreveport, LA 71101

Tammy J. Mangum  
Sabine COA  
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Many, LA 71449

DeSoto COA  
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Mansfield, LA 71052

Conchita Doyle  
Pine Belt Multipurpose Agency  
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Jonesboro, LA 71251

Mindend ARC  
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Minden, LA 71055

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Lincoln Parish - HELP  
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Lake Charles, LA 70601

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The ARC of North Webster  
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Sarepta, LA 71071

Wendy Harris  
Red River COA  
P O Drawer 688  
Coushatta, LA 71019

Bill Sadka, MS  
Executive Director  
Evergreen Life Services  
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Bossier City, LA 71111

Dathene Brown  
Webster COA  
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Minden, LA 71055

Mary Whitaker  
Webster Parish OCS  
P O Box 876  
Minden, LA 71058

Michael Young  
Volunteers of America North Louisiana  
520 Olive Street  
Shreveport, LA 71104
<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Address</th>
<th>City, State, Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janet Parker</td>
<td>The Arc of Caddo - Bossier</td>
<td>351 Jordan St</td>
<td>Shreveport, LA 71101</td>
</tr>
<tr>
<td>Lynn Stephens</td>
<td>United Way of Northwest LA</td>
<td>820 Jordan Street, Suite 370</td>
<td>Shreveport, LA 71101</td>
</tr>
<tr>
<td>Bud Chauncy</td>
<td>First Class Driving School</td>
<td>2710 Douglas Dr., Ste. D</td>
<td>Bossier City, LA 71111</td>
</tr>
<tr>
<td>Office of Aging and Adult Services</td>
<td>Bossier Office of Community Service</td>
<td>700 Benton Rd.</td>
<td>Bossier City, LA 71111</td>
</tr>
<tr>
<td>Debra E. Hamilton</td>
<td>United Way of NW LA Minden Center</td>
<td>202 Miller St.</td>
<td>Minden, LA 71055</td>
</tr>
<tr>
<td>Gregory Bradley</td>
<td>Caddo Community Action Agency</td>
<td>4055 St. Vincent Ave</td>
<td>Shreveport, LA 71108</td>
</tr>
<tr>
<td>Mary Mayfield</td>
<td>DeSoto Office of Community Services</td>
<td>404 Polk Street</td>
<td>Mansfield, LA 71052</td>
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<tr>
<td>Kagnee Veitch</td>
<td>United Way of NW LA Minden Center</td>
<td>202 Miller St.</td>
<td>Minden, LA 71055</td>
</tr>
<tr>
<td>Stacey Fuselier Pierce</td>
<td>Office of Behavioral Health Region 7</td>
<td>1310 N. Hearne Ave.</td>
<td>Shreveport, LA 71137</td>
</tr>
<tr>
<td>Margaret Basco</td>
<td>Project Celebration</td>
<td>580 W Main St.</td>
<td>Many, LA 71449</td>
</tr>
<tr>
<td>Lincoln OFS: Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>206 E. Reynolds Suite J</td>
<td>Ruston, LA 71273</td>
</tr>
<tr>
<td>Stacey Fuselier Pierce</td>
<td>Office of Behavioral Health Region 7</td>
<td>1310 N. Hearne Ave.</td>
<td>Shreveport, LA 71137</td>
</tr>
<tr>
<td>Red Cross - NWLA Chapter</td>
<td>805 Brook Hollow Drive</td>
<td></td>
<td>Shreveport, LA 71105-5638</td>
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<tr>
<td>Natchitoches OFS: Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>106 Charlene St.</td>
<td>Natchitoches, LA 71457</td>
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<tr>
<td>Bienville Parish of Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>910 W. Mississippi</td>
<td>Many, LA 71449</td>
</tr>
<tr>
<td>Alzheimer's Association</td>
<td>United Way of NW LA Minden Center</td>
<td>106 Charlene St.</td>
<td>Natchitoches, LA 71457</td>
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<tr>
<td>Office of Community Service</td>
<td>Bienville, Claiborne, Webster Parishes</td>
<td>P O Drawer 1076</td>
<td>Minden, LA 71058</td>
</tr>
<tr>
<td>Red River DCFS: Economic Stability</td>
<td>United Way of NW LA Minden Center</td>
<td>5040 Cut Off Rd.</td>
<td>Coushatta, LA 71019</td>
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<tr>
<td>Bienville Parish Police Jury</td>
<td>United Way of NW LA Minden Center</td>
<td>106 Charlene St.</td>
<td>Natchitoches, LA 71457</td>
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<tr>
<td>Annette Richardson</td>
<td>Caddo DCFS</td>
<td>1525 Fairfield Ave. Room 105</td>
<td>Shreveport, LA 71101</td>
</tr>
<tr>
<td>Sabine Parish of Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>910 W. Mississippi</td>
<td>Many, LA 71449</td>
</tr>
<tr>
<td>Theresa Mormino</td>
<td>Catholic Charities of Shreveport</td>
<td>3500 Fairfield Ave.</td>
<td>Shreveport, LA 71104</td>
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<tr>
<td>Webster OFS: Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>223 Pine Street</td>
<td>Minden, LA, 71055</td>
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<tr>
<td>Claiborne OFS: Family Assistance</td>
<td>United Way of NW LA Minden Center</td>
<td>910 W. Mississippi</td>
<td>Many, LA 71449</td>
</tr>
<tr>
<td>Philip Maxfield</td>
<td>iShuttle, Manager</td>
<td>500 Clyde Fant Pkwy, Suite 200</td>
<td>Shreveport, LA 71101</td>
</tr>
<tr>
<td>A Cross Faith/Benton UMC</td>
<td>United Way of NW LA Minden Center</td>
<td>4615 Palmetto Road</td>
<td>Benton, LA 71006</td>
</tr>
<tr>
<td>North Louisiana Goodwill Industries</td>
<td>United Way of NW LA Minden Center</td>
<td>800 W. 70th St.</td>
<td>Shreveport, LA 71106</td>
</tr>
<tr>
<td>Casey Lewis, Urban Program Mgr</td>
<td>United Way of NW LA Minden Center</td>
<td>800 W. 70th St.</td>
<td>Shreveport, LA 71106</td>
</tr>
<tr>
<td>Diann S. House</td>
<td>Town of Vivian</td>
<td>P O Box 832</td>
<td>Vivian, LA 71082</td>
</tr>
<tr>
<td>Philip Maxfield</td>
<td>iShuttle, Manager</td>
<td>500 Clyde Fant Pkwy, Suite 200</td>
<td>Shreveport, LA 71101</td>
</tr>
<tr>
<td>A Cross Faith/Benton UMC</td>
<td>United Way of NW LA Minden Center</td>
<td>4615 Palmetto Road</td>
<td>Benton, LA 71006</td>
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<td>North Louisiana Goodwill Industries</td>
<td>United Way of NW LA Minden Center</td>
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<td>Shreveport, LA 71106</td>
</tr>
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<td>Casey Lewis, Urban Program Mgr</td>
<td>United Way of NW LA Minden Center</td>
<td>800 W. 70th St.</td>
<td>Shreveport, LA 71106</td>
</tr>
</tbody>
</table>
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The Northwest Louisiana Council of Governments is an intergovernmental association of local governments established to assist in planning for common needs, cooperating for the mutual benefit, and coordinating for sound regional development. NLCOG’s purpose is to strengthen both the individual and collective power of local governments and to help them recognize regional opportunities, eliminate unnecessary duplication, and make joint decisions for the benefit of the entire Northwest Louisiana community. This is achieved by developing and implementing constructive and workable policies and programs for solving area-wide problems. These issues include, but are not limited to, matters affecting transportation, economic, health, safety, welfare, education, and regional development issues.

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